

### **REQUEST FOR PROPOSALS**

### RFP FY23 – Telehealth Network Service for Maniilaq Association

### F.O.B.: Maniilaq Association, P.O. Box 256, Kotzebue, AK 99752

### **<u>Closing Date:</u>** 30 Days from USAC Posting Online

Proposals, including all required attachments, must be received by Paula Octuck, Director of Contracts and Grants, Maniilaq Association ("Maniilaq") no later than 5:00 PM AST 30 calendar days from USAC posting date; addendum listing exact date to follow.

Proposals may be submitted electronically by email to rfpresponses@maniilaq.org. Electronic proposal submissions must be in PDF format. The subject line must read: PROPOSAL for RFP FY23 – Telehealth Network Service for Maniilaq Association.

Faxed proposals will not be accepted. Hardcopy proposals

may be hand -delivered or mailed to: Maniilaq

Association Attn: Paula Octuck, Director of Contracts and Grants 733 2nd Avenue P.O. Box 256 Kotzebue, Alaska 99752

Any proposal submitted in hardcopy must be submitted in a sealed package with the envelope clearly labeled. For details refer to *Section 6*. Failure to send a proposal according to the instructions in *Section 6* in time to meet the deadline allows immediate rejection without review. Maniilaq will not be responsible for the premature opening of, or the failure to open, any proposal not properly addressed and identified.

All questions concerning this Request must be submitted in writing to Paula Octuck in accordance with General Information, Section 5. Offerors must not contact any other Maniilaq employee or representative concerning this RFP. Any information a Proposer may obtain other than from Paula Octuck as directed here, will not bind Maniilaq. Unauthorized contacts with Maniilaq representatives may disqualify an offeror or its Proposal from consideration.

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### **GENERAL INFORMATION**

### 1. <u>Purpose of the Request for Proposal</u>

The purpose of this Request for Proposal ("RFP") is to solicit proposals from qualified firms for telehealth network services to provide continuing interconnection between twelve (12) health care facilities located in the Maniilaq Association Service Area in Northwest Alaska (described below) for a term of three (3) years beginning July 1, 2023:

- Maniilaq Health Center, 436 5<sup>th</sup> Avenue, Kotzebue, Alaska 99752
- Ambler Clinic, 110 Main Street, Ambler, Alaska 99786
- Buckland Clinic, 9 Hillside Road, Buckland, Alaska 99727
- Deering Clinic, 23 Main Street, Deering, Alaska 99736
- Kiana Clinic, 130 Casanoff Way, Kiana, Alaska 99749
- Kivalina Clinic, 8 Bering Street, Kivalina, Alaska 99750
- Kobuk Clinic, 51003 Main Street, Kobuk, Alaska 99751
- Noatak Clinic, 90 Aaksaik Road, Noatak, Alaska 99761
- Noorvik Clinic, 1897 Tundra Way, Noorvik, Alaska 99763
- Point Hope Clinic, 1729 Qalgi Avenue, Point Hope, Alaska 99766
- Selawik Clinic, 3 Adams Landing, Selawik, Alaska 99770
- Shungnak Clinic, 80 Back Street, Shungnak, Alaska 99773

### 2. <u>Description and Service Requirements</u>

The Maniilaq Association Telehealth Network (the "Network") currently supports delivery of primary health care services, health care administrative support services, and health care training services. The Network carries data traffic, videoconference traffic, VoIP traffic, intranet traffic, and commodity internet traffic, all in IP protocol format.

Telehealth Network services provided to eleven (11) village clinics and to the Maniilaq Health Center in Kotzebue are eligible for USAC Rural Health Care discounts. This RFP is for telehealth network services at Maniilaq Health Center in Kotzebue and all eleven (11) village clinics. An RHC Form 465 has been filed at Rural Health USAC-for these services.

The topography of the Network is shown in **Appendix A**. The Network includes interconnection to the ANTHC WAN and the commodity Internet via routed gateways located in Anchorage. A summary of the service requirements and associated locations is set forth in **Appendix B**.

**Appendix A** also depicts the current service level received at 150 Mbps Fiber MPLS at the Maniilaq Health Center in Kotzebue and 50 Mbps Terrestrial, Fiber or Satellite MPLS at all eleven (11) village clinics, however, due to current usage near, or at capacity, we are requesting three different price option proposals for consideration for each of the following:

### Maniilaq Health Center:

- **Current:** 150 Mbps Fiber MPLS (current)
  - With 80 Mbps Satellite to Anchorage as back-up

- **Price Option 1**: 300 Mbps or equivalent Terrestrial, Fiber or Satellite MPLS; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
  - With 80 Mbps or Equivalent Satellite, Terrestrial or Fiber MPLS to Anchorage as a Backup; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
- **Price Option 2**: 600 Mbps or equivalent Terrestrial, Fiber or Satellite MPLS; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
  - With 80 Mbps or Equivalent Terrestrial, Fiber or Satellite MPLS to Anchorage as a Backup; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
- **Price Option 3**: 1 Gbps or equivalent Terrestrial, Fiber or Satellite MPLS; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
  - With 80 Mbps or equivalent Terrestrial, Fiber or Satellite MPLS to Anchorage as a Backup; terrestrial, Fiber or low orbiting Satellite preferred where available (New)

### Village Clinic Locations:

- **Current:** 50 Mbps Terrestrial, Fiber or Satellite MPLS; terrestrial where available preferred (current)
  - With 10 Mbps Satellite to Anchorage as back-up (Current)
- **Price Option 1**: 50 Mbps or equivalent Terrestrial, Fiber or Satellite MPLS; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
  - With 10 Mbps or equivalent Satellite, Terrestrial or Fiber MPLS to Anchorage as a Backup; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
- **Price Option 2**: 70 Mbps or equivalent Terrestrial, Fiber or Satellite MPLS; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
  - With 10 Mbps or equivalent Satellite, Terrestrial or Fiber MPLS to Anchorage as a Backup; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
- **Price Option 3**: 100 Mbps or equivalent Terrestrial, Fiber or Satellite Mbps; terrestrial, Fiber or low orbiting Satellite preferred where available (New)
  - With 10 Mbps or equivalent Satellite, Terrestrial or Fiber MPLS to Anchorage as a Backup; terrestrial, Fiber or low orbiting Satellite preferred where available (New)

#### **Technology Neutral**

Maniilaq understands that the competitive bidding process must be "technology neutral" to comply with the Federal Communication Commission competitive bidding rules (47 C.F.R. § 54.603 and § 54.642). Nothing in this RFP is intended to undermine competitive bidding requirements. Any technology specific information in this RFP is meant to be *guidance only*. Any vendor, regardless of the technology that the vendor uses to provide service, is welcome to submit a bid for this RFP. If the vendor cannot provide the specific technology requested (example: QoS) the vendor should respond with detailed information on exactly what *equivalent* service or equipment, the vendor offers to provide. Quotes may be requested for variable levels of service.

Local support for Telehealth Network services must be included in the offeror's proposal. The proposer must demonstrate local technical support will be immediately available to all locations as necessary and include all costs associated with providing technical support to Maniilaq.

Maniilaq Information Technology internal support services ("IT") are demarked clearly from third party services needed, in the Description below, and are excluded from the scope of this RFP. Maniilaq's IT personnel are located in Kotzebue with remote technicians in most villages. Maniilaq's IT support at the Anchorage end is provided by current contracted carrier and Alaska Tribal Health System Wide Area Network ("WAN") staff based at the Alaska Native Tribal Health Consortium ("ANTHC").

### DESCRIPTION

The Network provides access to clinical services via telecommunications to eleven (11) village clinics, with a clinical services hub at the Maniilaq Health Center in Kotzebue, Alaska. Local Community Health Aides and other Maniilaq support personnel deliver clinical services in 11 village clinics.

Telecommunication services to the Network are currently provided by a third party service provider. The third party provides WAN interconnection and transport between all Maniilaq sites, network management support, commodity internet gateway service, IP security, and H.323 videoconference service as required.

The IP hub of the network is a Cisco 6500 router located at Maniilaq Health Center in Kotzebue. Telecommunications services to the 11 village clinics and to Anchorage are provided over satellite connections from the hub router. The clinics are provided with identical facility routers and associated components using Meraki Switches.

The current demarcation between Maniilaq IT support and the third party's service is the clinic-facing Ethernet Interface in each facility router. The facility routers in the Network are owned and managed by the third party. Maniilaq expects the existing type of demarcation methodology with the telecommunication carrier to be maintained with continuous improvement. Requirements imposed by the Health Insurance Portability and Accountability Act, as amended, and its implementing regulations underscore the importance of clarity and maintenance of this demarcation.

Maniilaq IT personnel are located in Kotzebue and travel between villages when needed. Maniilaq IT support for all of the clinical LANs and associated workstations in the Network are directed from Kotzebue. Third party service staff and ANTHC provide information technology support in Anchorage. During the course of this contract, Maniilaq expects to maintain this support with the successful offeror and ANTHC.

Current bandwidth provisioning to clinics and Anchorage is based on the third party's satellite service, a commercial, C-band satellite-based, data transport service. The service is based on the demand for bandwidth signaled by each clinical site. Currently we have a high-latency internet connection to the villages with a ping time of 500-600ms. We would like to reduce the latency time to under 100ms.

### SERVICE REQUIREMENTS

### Voiceover IP

Voice communications are carried over the WAN encapsulated in IP packets as a means of cost avoidance of Long Distance charges, and to position Maniilaq to take advantage of emerging VoIP functionality.

Currently the Voice to IP connectivity in all village locations is provided by digital voice interfaces installed in the Shore Tel telephone system. For the purposes of this RFP it should be assumed that the remote sites will continue to require connectivity to provide for the VoIP functionality.

The voice clarity of VoIP conversations is to be acceptable to the Maniilaq user, as determined by Maniilaq IT staff in qualitative call tests. Offeror will show Maniilaq what bandwidth they propose be allocated by Maniilaq equipment to support this proposed application.

Latency and jitter across the WAN must be of a measure that does not interfere with the establishment of a call, the progress of conversation during the call, or with the termination of a call.

VoIP voice service should have the highest priority in the flow of services across the WAN, and may be considered equivalent in priority to Video Conference service.

The availability of VoIP service across that part of the network served by satellite links will be measured each quarter (3 months). Network downtime due to predicted sun outages at the fall and spring equinoxes will not be used in the computation of availability.

The availability of VoIP service across that part of the network served by terrestrial links will be measured each quarter (3 months).

There is a mixture of circuit-switched telephone handsets and VoIP handsets in use on the Maniilaq network. The telecommunications network service provider is not responsible for the configuration and maintenance of these telephone handsets. Maniilaq does require the telecommunications network service provider to recommend explicit VoIP and circuit-switched telephone handset configurations considered to be "best practice" with respect to optimal utilization of the provider's VoIP service.

### Video Conference

H.323 videoconference communications are carried over the WAN encapsulated in IP packets. Zoom manufactures the end-user equipment. Each end user set has limited functionality as a multi-point video bridge.

The predominant form of use has become point-to-multipoint videoconference sessions accompanied by less-frequent point-to-point sessions. Point-to-multipoint sessions interconnecting all 11 clinics with Kotzebue need to be accommodated if requested. In addition, the growth to two of these "all points" multipoint videoconference operating simultaneously is suggested. Multipoint conferencing operating simultaneously with other network services is suggested.

The voice and video clarity of videoconference sessions is to be acceptable to the Maniilaq user, as determined by Maniilaq IT staff in qualitative videoconference tests.

Latency and jitter across the WAN must be of a measure that does not interfere with the establishment of a videoconference session, the progress of the video and voice conversations during the session, or with the termination of a session.

Videoconference service should have the highest priority in the flow of services across the WAN, and may be considered equivalent in priority to VoIP service.

The availability of videoconference service across that part of the network served by satellite links will be measured each quarter (3 months). Network downtime due to predicted sun outages at the fall and spring equinoxes will not be used in the computation of availability.

The availability of videoconference service across that part of the network served by terrestrial links will be measured each quarter (3 months).

In the event of interruption of WAN data transport, videoconference service across the WAN is expected to also be down.

In the Maniilaq Telehealth Network there will continue to be a mixture of videoconference equipment in numbers and at locations appropriate to temporal decisions at Maniilaq. The telecommunications network service provider is not responsible for the configuration and maintenance of these videoconference sets. Maniilaq does require the telecommunications network service provider to recommend explicit videoconference set configurations considered to be "best practice" with respect to optimal utilization of the provider's videoconference service. Maniilaq is requesting the carrier's familiarity and certifications in working with Microsoft Teams and Zoom for assistance when or if necessary.

Maniilaq has several important collaborations in health care and distance education, which are implemented over WAN telecommunication services using videoconference equipment. Maniilaq expects additional, similar collaborations to emerge in an opportunistic manner over the course of this contract.

Overall, Maniilaq will be aggressively pursuing opportunities for improving remote health care and distance education services to its clinics over the course of this contract. Any comments carrier may wish to provide regarding their telecommunications services and plans with regard to Maniilaq service plans will be read and considered as a part of this RFP.

#### Intranet

TCP/IP client-server communications within the Maniilaq organization are carried over the WAN encapsulated in IP packets. These communications include intra-organization email, file sharing, and remote access to central database information.

At all clinics, the WAN must be able to support simultaneous intranet IP service sessions composed of client email sessions and Village-to-Kotzebue database sessions, concurrent with other network services.

At the Maniilaq Health Center, the WAN must be able to support 700 simultaneous intranet IP service sessions aggregate, as described above, concurrent with other network services.

The screen refresh time of intranet sessions is to be acceptable to the Maniilaq user, as determined by Maniilaq IT staff in objective testing. Recognizing the differences between vendor services and recognizing all of the many variables affecting application performance across the WAN, Maniilaq prefers the vendor to propose objective test criteria which may be cooperatively used by Maniilaq and the carrier to monitor intranet service quality.

Latency and jitter across the WAN must be of a measure that does not interfere with the establishment of an intranet client-server transaction, the progress of the transaction, or with the termination of a transaction.

Intranet service should have the second highest priority in the flow of services across the WAN, and may be considered higher in priority than Internet service.

The availability of intra net service across that part of the network served by satellite links will be measured each quarter (3 months). Network downtime due to predicted sun outages at the fall and spring equinoxes will not be used in the computation of availability.

In the event of interruption of WAN data transport, intranet service will be considered to be down.

In the Maniilaq Telehealth Network there will continue to be a mixture of computer workstations and servers in numbers and at locations appropriate to temporal decisions at Maniilaq. The telecommunications network service provider is not responsible for the configuration and maintenance of these workstations and servers. Maniilaq does require the telecommunications network service provider to recommend explicit workstation and server IP configurations considered to be "best practice" with respect to optimal utilization of the provider's intra net service.

### Internet

Maniilaq requires broadband access to the Internet at all sites in the network. At the Maniilaq Health Center, the internet connectivity must be able to support 700 simultaneous users at a fixed rate. At each Clinic, the WAN must be able to support a minimum of multiple simultaneous broadband Internet sessions concurrent with other network services.

Latency and jitter across the WAN must be of a measure that does not interfere with the establishment of an internet session, the progress of the session, or with the termination of a session.

Internet service should have the lowest priority in the flow of services across the WAN, and may be considered lower in priority than intranet service.

The availability of internet service across that part of the network served by satellite links will be measured each quarter (3 months). Network downtime due to predicted sun outages at the fall and spring equinoxes will not be used in the computation of availability.

The availability of internet service across that part of the network served by terrestrial links will measure each quarter (3 months).

In the event of interruption of WAN data transport, internet service will be considered to be down.

In the Maniilaq Telehealth Network there will continue to be a mixture of user workstations in numbers and at locations appropriate to temporal decisions at Maniilaq. The telecommunications network service provider is not responsible for the configuration and maintenance of these workstations. Maniilaq does require the telecommunications network service provider to recommend explicit workstation IP configurations considered to be "best practice" with respect to optimal utilization of the provider's Internet service.

### Virtual Desktop Infrastructure

Maniilaq Health Center runs the regular desktop operating system by utilizing a Virtual Desktop Infrastructure (VDI). The bandwidth requirements is 2 mb per user with a latency of <800ms rtt. While we have the required bandwidth, our current latency is 700+ ms rtt. Our system functions adequately because PCoIP is a streaming UDP protocol co consistency make it operate smooth with a slight delay. A lower latency would greatly impact performance in the villages.

## Security

An IP firewall is required between the commodity Internet and the hub router in the Maniilaq Telehealth Network, and will provide the following IP security services:

- 1. IP security is essential to HIPAA compliance
- 2. IP security consistent best industry practices
- 3. Application/Port filtering, threat protection, etc.
- 4. URL filtering

The carrier is expected to provide IP security, and should describe the level and quality of IP security proposed. Maniilaq expects the carrier of service to have expertise in this area.

Currently, the Maniilaq Telehealth Network uses IPsec VPNs. These VPNs need to be maintained for connectivity to required organizations.

### Network Management

Maniilaq provides management of WAN Services, in the following categories:

- 1. Fault Management (service re-storal)
- 2. Performance Management (proactive management)
- 3. Configuration Management (archive and re-storal of network element configuration)
- 4. Security Management (the integration of security with other mgmt.)
- 5. Accounting (of network flows)
- 6. Planning (network traffic studies, and best practice support)

The carrier should briefly describe their WAN management practices in each of these categories.

Given the unique relationship of network management to different commercial services for each carrier, Maniilaq has no fixed requirements for network management, except that the proposer should be explicit in describing how each kind of network management service category is offered.

### Continuity of Service

Offerors must provide a detailed, timeline and plan for moving Maniilaq's current Network onto the new, proposed telecommunications service. Offerors should keep in mind that Maniilaq provides lifeline healthcare services to its constituents in 11 villages from the Maniilaq Health Center hub.

### Local Service Support

Since the first deployment of telecommunications to the Northwest Alaska villages, and over the subsequent growth in Telehealth and distance education, Maniilaq has learned that the best technology service support is local support, provided by local workers who, in addition to their technical expertise, clearly understand the relationship between local health care and well-maintained technology services.

The importance of Maniilaq healthcare services has grown to the point where we must work to keep WAN telecommunications up and functioning continuously, without waiting for the arrival of a traveling technician, and without waiting for shipment of spares from thousands of miles away. Maniilaq's dependency on WAN telecommunications is expected to grow during the course of the contract.

Proposers must express plans for implementation of local support of Maniilaq Association's telecommunication services.

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### 4. <u>Procurement Timeline</u>

Event	Date			
465 Form and RFP submitted to USAC for review via My Portal	January 2023			
USAC will post 465 Form and RFP	Approximately four weeks following the initial submission in My Portal			
RFP Responses Due	30 days following posting of 465 form by USAC			
Evaluation of Proposals	Evaluation period is 14 days			
Notification of Bidding Outcomes to Service Providers	Following the bid evaluation period			
Contract Negotiations	Following the notification period			
466 Form Submitted	Following the identification of service providers/return of contracts, etc.			
Approximate Service Start Date	July 1, 2023 *Contingent Upon Successful Contract Negotiations and Board of Directors Approval			
467 Forms Submitted	Following the approval of funding			

## 5. <u>Conflict of Interest and Restrictions</u>

If any Proposer, Proposer's employee, representative, agent, subcontractor, or any individual anticipated to be assigned to work on the Maniilaq contract on Proposer's behalf, has an actual or potential conflict of interest that could affect the integrity, objectivity, analysis, and/or performance of the entity's proposal or potential contract with Maniilaq, the actual or potential conflict must be declared in writing and submitted to Maniilaq promptly, and no later than the response due date. Maniilaq will notify the Proposer of its determination of the significance and materiality of the potential or actual conflict once review is complete. If a conflict exists, Maniilaq may eliminate the proposer from submitting a proposal or, if a proposal has already been submitted, disqualify the proposal. Proposers are encouraged to identify potential or actual conflicts early, by requesting clearance from Maniilaq well before the deadline. Use the subject line, "Maniilaq Association Telehealth Network Services **Potential Conflict Clearance**," and submit the request in accordance with *Section 5* below.

## 6. <u>Maniilaq Association Contact Person</u>

Any information requests, questions, or conflict clearance requests related to this RFP should submitted by email to Paula Octuck, with subject title: **RE: Maniilaq Association Telehealth Network Services**, to: rfpresponses@maniilaq.org

## 7. <u>Deadline for Receipt of Proposals and Submission Instructions</u>

Proposals may be emailed, mailed, or hand -delivered to the email, mailing, or physical address listed on page 1. Proposals must be received by Maniilaq no later than **5:00PM Alaska Standard Time 30 days** from USAC RFP Posting; exact date to be provided in following addendum.

Email submissions must be in PDF format. *Files shall be no larger than 20 MB*. If necessary to avoid exceeding the 20 MB limit, send files in separate emails. Failure to send a proposal according to the instructions in this section and by the deadline will result in the proposal being considered non-responsive and disqualification of the proposal without review.

Mailed or hand -delivered hardcopy proposals must include 3 copies. Both the outer and inner envelope shall contain the following:

Confidential: Do Not Open Proposal For: FY 23 – Telehealth Network Service for Maniilaq Association Attn: Paula Octuck, Director of Contracts and Grants

## 8. <u>Proposer's Review and Substantive Questions</u>

Proposers should carefully review this RFP for items requiring clarification. Proposers must submit their comments and/or questions in a clearly written e-mail sent to the contact identified in Section 5. Maniilaq will respond to substantive questions in writing and publish such responses to ensure all potential bidders have access to the same information.

## 9. <u>Proposer's Review and Directional Questions</u>

If questions received are not substantive in nature, Maniilaq may respond without issuing an addendum. All proposers are encouraged to carefully read the entire RFP before submitting questions.

## 10. Addendum to the RFP

Maniilaq reserves the right to issue written addenda to revise or clarify the RFP, respond to questions, and/or extend or shorten the due date of proposals or otherwise change the Proposal Timeline set forth in Section 3 above. It is the responsibility of the Proposer to familiarize themselves with any published addenda.

## 11. <u>Cancellation of the RFP</u>

Maniilaq retains the right to cancel the RFP process at Maniilaq's sole discretion. In the event of cancellation, Maniilaq shall not be responsible for costs incurred by proposers for proposal preparation.

## 12. <u>Proposal Withdrawal and Correction</u>

A proposal may be corrected or withdrawn by a written request received prior to the date of opening proposals.

## 13. <u>Multiple Proposals</u>

Maniilaq Association will not accept multiple proposals from the same proposer. If due to a serious emergency or transmission problem, a proposer uses more than one method of delivery or transmission to ensure the deadline is met, the proposer must immediately explain its action in writing sent to Maniilaq's

contact in Section 5.

## 14. <u>Disclosure of Proposal Contents</u>

A proposal's content shall not be disclosed to other proposers. Maniilaq will not disclose proposals, even by written request, after contracts have been negotiated and/or awarded.

## 15. <u>Retention of Proposals</u>

All proposals and other material submitted become Maniilaq property and may be returned only at Maniilaq's option.

## 16. <u>Cost of Proposal Preparation</u>

Any and all costs incurred by proposers in preparing and submitting a proposal are the proposers' responsibility and shall not be charged to Maniilaq or reflected as an expense of the resulting contract.

## 17. <u>Delivery of Proposals</u>

Maniilaq Association assumes no responsibility or liability for the transmission, delay, or delivery of proposals by either public or private carriers.

## 18. <u>Governmental Requirements</u>

It is the responsibility of the proposer to comply with all applicable federal, state, and local statutes, regulations, ordinances, and/or requirements, including without limitation those applicable to the Federal Communications Commission Telecommunications Program within the Rural Healthcare Program.

## **19.** Disclaimer of Contract or Liability

This RFP does not obligate Maniilaq or the selected proposer in any manner whatsoever. Only a contract signed by both parties shall be binding. Maniilaq shall not be responsible for work done or expenses incurred by any proposer or potential proposer, in reliance on this Request. Maniilaq reserves all rights to reject all proposals, to waive proposal irregularities or deficiencies for one or more proposals, to seek additional information from proposers before making its selection, and to negotiate terms with a selected proposer, in Maniilaq's unrestricted discretion.

## 20. <u>Proposal Content and Requirements</u>

- **19.2 Proposal Format:** Proposals should be organized according to the following outline:
  - **19.2** <u>**Table of Contents:**</u> The proposal will have a table of contents with page numbers and pages numbered throughout the proposal.

## 19.3 **Introduction:** Brief introduction which includes:

- a. The proposer's name and address;
- b. Statement that indicates the proposal is valid for at least 90 days from the proposal submission

deadline;

- c. Statement that indicates the proposer's willingness to perform the services described in this RFP and to participate in the FCC Rural Healthcare Program Telecommunications Program, as administered by the Universal Service Administrative Company;
- d. Provide a detailed overview of the services being offered, no longer than 2 single spaced pages.
- e. Proof of any other licenses and/or registrations as required by this RFP;
- f. A statement that all staff and other resources which are required to perform the services described in this RFP will be made available by the proposer's organization over the life of the anticipated contract;
- g. Statement that the signatory has authority to bind the proposer; and
- h. Signature of authorized individual.

### 19.3 Firm Profile

Offeror must provide a table or chart that shows organizational structure, chain of supervision, decision authority, and communications. Include both the proposer's firm structure and any sub-consultant firms/subcontractors. Indicate whether the firm is licensed to conduct business in Alaska or will obtain an Alaska business license if selected.

### 19.4 Professional Qualifications

Proposal must include professional qualifications and technical excellence of the firm's proposed Project Manager, other key personnel, and/or team members necessary for satisfactory performance of required services. Personnel qualifications, professional designations and certifications, experience with overall installation, integration and maintenance capabilities based upon performance record and availability of sufficient high quality vendor personnel with the required skills and experience for the specific approach. Include all personnel that will actively be involved in performing the work, to include a listing of all subcontractors, if any, with explanation of their scope and role.

### 19.5 Project Approach

Narrative submittal must address the approach the offeror will take to provide the services, to include a detailed timeline and plan for moving Maniilaq's current network onto the new, proposed telecommunications service.

### 19.6 Past Performance and References

Provide at least three (3) references in Alaska for individuals and/or organizations for whom you have provided services similar to the subject of this solicitation during the last two (2) years. Provide a contact name, phone numbers and email addresses for the references. Provide a description of similar past performance over the last five (5) years, with a contact name, number and address if the contact is not listed as a reference.

### 19.7 <u>Reliability</u>

Provide recent historical data that shows the number of outages and average time it took to resolve the outage issues in the last three years in services provided to a similar organization.

### 19.8 <u>Technical Support</u>

In order to decrease any down times for service, proposers must identify if they have local technical support. Access to local technical support will enhance major outage response times.

### 19.9 Price Proposal

State the proposer's pricing for services detailed in Description and Service Requirements, Section 2 of this RFP. Provide a detailed breakdown of the rates for each of the services requested. A sample copy of your agreement as well as any documentation explaining the different Services should also be provided. Cost or rates should be valid for the term of the contract.

### 19.10 Capacity to Respond and Accomplish the Work

Include a list of Rural Health Care projects the firm currently has under contract.

### 19.11 Alaska Native / American Indian Preference

Maniilaq Association shall give preference to qualified American Indian/Alaska Native-owned organizations in accordance with the Indian Self-Determination and Education Assistance Act, P.L. 93-638. The successful offeror will be required to provide American Indian/Alaska Native preference in subcontracting, and training and employment. Proposals shall include a statement agreeing to provide American Indian/Alaska Native preference in subcontracting, training, and employment. To obtain preference under this RFP, proposers must submit verification and documentation of American Indian/Alaska Native ownership with their proposal.

## 19.12 Clean Air Act the Federal Pollution Control Act

Proposals must include a statement agreeing to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387).

## 19.13 Byrd Anti-Lobbying Amendment

Proposals must include a statement agreeing to file an anti-lobbying certification, and will also require every subcontractor with a subcontract over \$100,000 to also file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier must also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to Maniilaq.

### **<u>19.14</u>** Debarment and Suspension / Red Light Rule

Maniilaq will not contract with any party listed on the Federal Excluded Parties List System in the System for Award Management. Proposals must include a statement certifying that the proposer is not listed on the Excluded Parties List System and that the proposer will notify Maniilaq within three (3) days if they are later listed on the Excluded Parties List.

Any bidder, or the sub-contractor of a bidder, who is currently under, or has reason to believe they may have a red light status under the FCC's "Red Light Rule" must disclose such information in the proposal.

In the event the selected bidder becomes or is found to be listed on the Excluded Parties List System or to have "Red Light" status during the term of the contract, Maniilaq may terminate the contract at its sole option.

### 19.15 Insurance

Proposers must provide proof of coverage, or a statement that they maintain the coverage below, or that the following coverage will be obtained if selected for this work. Further, if selected, the successful proposer will be required to submit certificates of insurance documenting the insurance levels listed below, and to list Maniilaq as an additional insured prior to performing work for Maniilaq. All such insurance shall be issued by a company that is licensed to do business in the State of Alaska and that has a rating equal to or exceeding A-VII from A.M. Best.

- General Liability \$1,000,000 per occurrence and \$3,000,000 aggregate
- Professional Liability \$1,000,000 per occurrence and \$3,000,000 aggregate
- Cyber Liability \$3,000,000 per occurrence and \$3,000,000 aggregate
- Workers Compensation Statutory
- Employers Liability \$500,000 each Accident

## 2. <u>Review of Proposals</u>

## 20.1 Evaluation Process

An evaluation committee consisting of Maniilaq employees and/or qualified representatives shall evaluate responsive proposals. Each member of the committee will evaluate each proposal using their individual judgment. The members may deliberate, collaborate and discuss their analysis before rating proposals. The evaluation will be based on the response to the proposal content, and other requirements stated in this RFP, including references.

## 20.2 Evaluation Criteria

Proposals will be evaluated on the following criteria:

- Firm Profile: scored on a 0-8.5 point scale
- Professional Qualifications: scored on a 0-10 point scale
- Project Approach: scored on a 0-10 point scale
- Past Performance: scored on a 0-10 point scale
- Reliability: scored on a 0-10 point scale
- Technical Support: scaled on a 0-4 point scale
- Capacity to Respond and Accomplish Required Work: scored on a 0-20 point scale
- Price Proposal: scored on a 0-25 point scale
- Alaska Native/American Indian Ownership Preference 2.5 additional points

### 20.3 Discussions

As determined by Maniilaq, any proposer may be offered the opportunity to discuss their proposal with the contract officer or evaluation committee. Their proposal may be adjusted as a result of discussion. One or more proposers may also be invited to submit a best and final proposal, in Maniilaq's sole discretion.

Maniilaq reserves the right to require an oral presentation from any one or more proposers.

### 20.3 Notice of Award and Contract Negotiations

After the evaluation process is complete, the successful proposer will be issued a Notice of Award and contract negotiations will commence. Maniilaq reserves the right to terminate contract negotiations at any time in Maniilaq's sole discretion, for any reason, including the proposer's failure to provide necessary information in a timely manner, to negotiate in good faith, or to discuss collaboratively how the work or any portion of the work can be performed within the amount of funding available or budgeted. Maniilaq reserves all rights and will not be responsible for costs incurred by the proposer associated with negotiations or providing additional analysis or information.

### 2. Information about Maniilaq Association

Maniilaq Association is a non-profit corporation recognized under section 50l(c)(3) of the Internal Revenue Code of 1972, as amended. Maniilaq is also a tribal organization, as defined in Section 4 of the Indian Self-Determination and Education Assistance Act ("ISDEAA"), 25 U.S.C. § 5304. Maniilaq Association is a rural health, social, and tribal services provider with a budget in excess of \$120 million annually, and more than 600 employees. It is the largest single employer within the Northwest Arctic. Geographically, the Maniilaq service area consists of the "hub" town of Kotzebue, population 3,200, and 11 surrounding villages ranging in population from 120 to 1000.

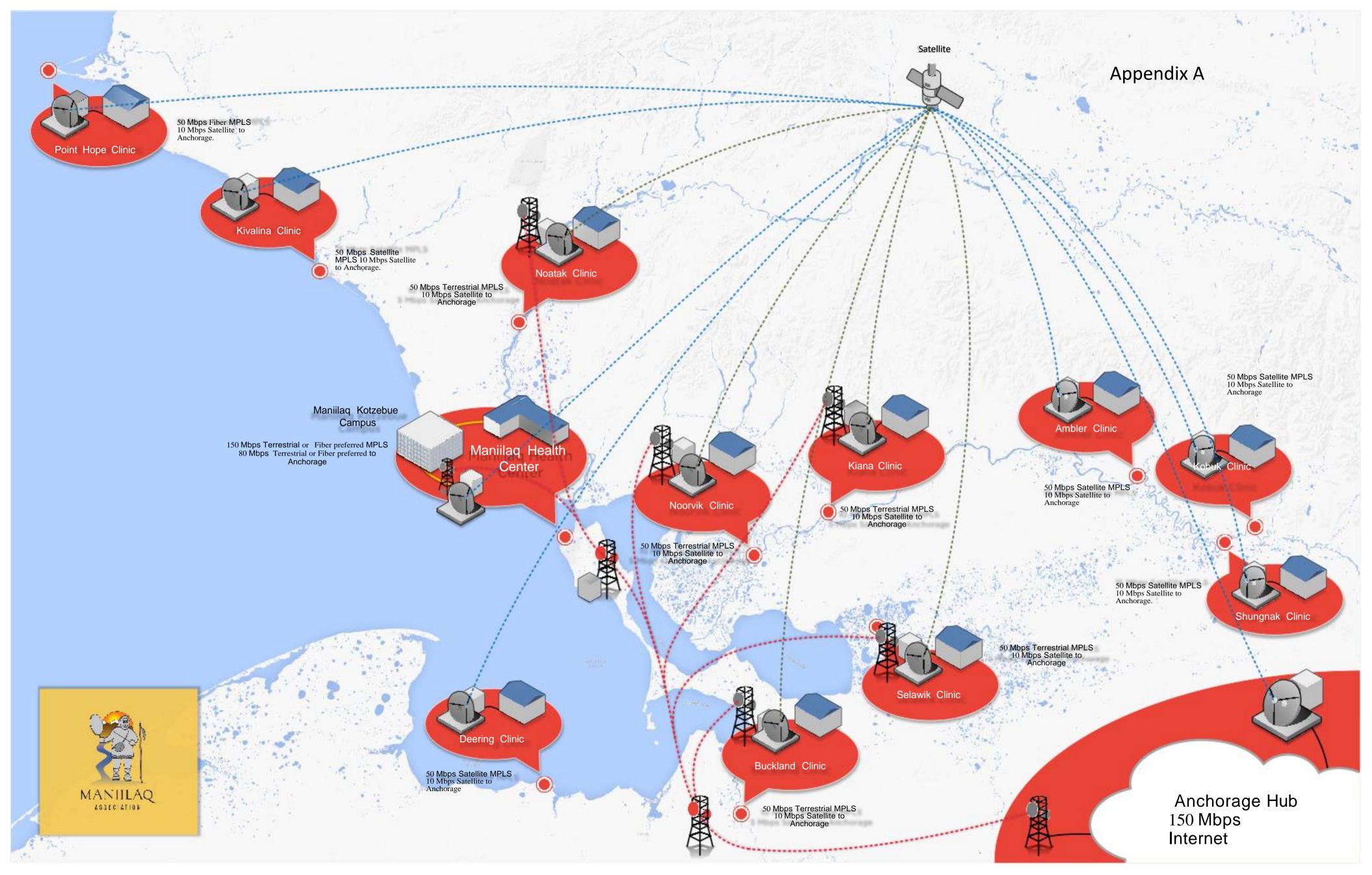
Maniilaq Association has engaged in health care and advocacy services in the Northwest Alaska region for over thirty years. In 1966, the Northwest Alaska Native Association was formed as a non-profit corporation, to attain social justice, land rights, and self-determination for the community. After the Alaska Native Claims Settlement Act of 1971 (ANCSA) passed, the for-profit, ANCSA Regional Corporation known as NANA was formed. The nonprofit arm of the original association was formed in 1972 as Mauneluk Association. Mauneluk Association changed its name to Maniilaq Association in 1981.

Maniilaq Association's mission is 'Savaqatigiiksugut (we are working together)'. Working together to provide high quality, culturally relevant health, social, and tribal services. Our vision is 'Healthy people, thriving communities'.

<u>Health Services</u>: Maniilaq compacts with the Indian Health Service to operate the 80,000- square foot, Joint-Commission accredited Maniilaq Health Center. Services provided include a 17-bed inpatient unit, emergency and outpatient services, a specialty clinic and contract vision care services, dental, pharmacy, radiology, laboratory and physical therapy. Through its co-located 18-bed long-term care and skilled nursing facility, Maniilaq provides culturally appropriate services to the Region's Elders. Maniilaq also operates a community health center in each of the 11 villages in the Maniilaq Service Area.

<u>Social Services</u>: Through the Behavioral Health division, Maniilaq operates a number of programs: counseling and recovery support, juvenile alcohol safety, wellness, and the Putyuk Children's Home. Through the Senior and Disabilities Services division, Maniilaq provides essential programs: developmental disabilities, Lake Street House Group Home, Short Term Assistance and Referral, Elder Services, Traumatic and Acquired Brain Injury, and Tupqich Elder Housing.

<u>*Tribal Services:*</u> Maniilaq compacts with the Bureau of Indian Affairs to provide a wide variety of services to tribes and tribal members, including technical support, child and family services, and workforce development.



#### Appendix B Maniilaq Association

Locations of	out to Bid			Services out to Bid					
#	HCP #	Site Name	Address	City	State	Zip	Requested Service (or equivalent)	Bandwidth Requested	Contract Term
1	10810	Maniilaq Health Center	436 5th Ave.	Kotzebue	AK	99752	Terrestrial MPLS	150 Mbps	MTM
	10810	Maniilaq Health Center	436 5th Ave.	Kotzebue	AK	99752	Satellite MPLS	80 Mbps	MTM
	10810	Maniilaq Health Center	436 5th Ave.	Kotzebue	AK	99752	Terrestrial, Fiber or Satellite MPLS	300 Mbps, 600 Mbps, 1 Gbps	36 months
	10810	Maniilaq Health Center	436 5th Ave.	Kotzebue	AK	99752	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	80 Mbps	36 months
2	10811	Ambler Clinic	110 Main St.	Ambler	AK	99786	Terrestrial or Satellite MPLS	50 mbps	MTM
	10811	Ambler Clinic	110 Main St.	Ambler	AK	99786	Satellite Backup to Anchorage	10 mbps	MTM
	10811	Ambler Clinic	110 Main St.	Ambler	AK	99786	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10811	Ambler Clinic	110 Main St.	Ambler	AK	99786	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
3	10812	Buckland Clinic	9 Hillside Road	Buckland	AK	99727	Terrestrial or Satellite	50 mbps	MTM
	10812	Buckland Clinic	9 Hillside Road	Buckland	AK	99727	Satellite Backup to Anchorage	10 mbps	MTM
	10812	Buckland Clinic	9 Hillside Road	Buckland	AK	99727	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10812	Buckland Clinic	9 Hillside Road	Buckland	AK	99727	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
4	10813	Deering Clinic	23 Main Street	Deering	AK	99736	Terrestrial or Satellite	50 mbps	MTM
	10813	Deering Clinic	23 Main Street	Deering	AK	99736	Satellite Backup to Anchorage	10 mbps	MTM
	10813	Deering Clinic	23 Main Street	Deering	AK	99736	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10813	Deering Clinic	23 Main Street	Deering	AK	99736	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
5	10249	Maniilaq Association - Kiana	130 Casanoff Way	Kiana	AK	99749	Terrestrial or Satellite	50 mbps	MTM
	10249	Maniilaq Association - Kiana	130 Casanoff Way	Kiana	AK	99749	Satellite Backup to Anchorage	10 mbps	MTM
	10249	Maniilaq Association - Kiana	130 Casanoff Way	Kiana	AK	99749	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months

	10249	Maniilaq Association - Kiana	130 Casanoff Way	Kiana	AK	99749	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
6	10814	Kivalina Clinic	8 Bering St.	Kivalina	AK	99750	Terrestrial or Satellite	50 mbps	MTM
	10814	Kivalina Clinic	8 Bering St.	Kivalina	AK	99750	Satellite Backup to Anchorage	10 mbps	MTM
	10814	Kivalina Clinic	8 Bering St.	Kivalina	AK	99750	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10814	Kivalina Clinic	8 Bering St.	Kivalina	AK	99750	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
7	10815	Kobuk Clinic	51003 Main St.	Kobuk	AK	99751	Terrestrial or Satellite	50 mbps	MTM
	10815	Kobuk Clinic	51003 Main St.	Kobuk	AK	99751	Satellite Backup to Anchorage	10 mbps	MTM
	10815	Kobuk Clinic	51003 Main St.	Kobuk	AK	99751	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10815	Kobuk Clinic	51003 Main St.	Kobuk	AK	99751	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
8	10816	Noatak Clinic	90 Aaksaik Road	Noatak	AK	99761	Terrestrial or Satellite	50 mbps	MTM
	10816	Noatak Clinic	90 Aaksaik Road	Noatak	AK	99761	Satellite Backup to Anchorage	10 mbps	MTM
	10816	Noatak Clinic	90 Aaksaik Road	Noatak	AK	99761	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10816	Noatak Clinic	90 Aaksaik Road	Noatak	AK	99761	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
9	10817	Noorvik Clinic	1897 Tundra Way	Noorvik	AK	99763	Terrestrial or Satellite	50 mbps	MTM
	10817	Noorvik Clinic	1897 Tundra Way	Noorvik	AK	99763	Satellite Backup to Anchorage	10 mbps	MTM
	10817	Noorvik Clinic	1897 Tundra Way	Noorvik	AK	99763	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10817	Noorvik Clinic	1897 Tundra Way	Noorvik	AK	99763	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
10	10818	Point Hope Clinic	1729 Qalgi Avenue	Point Hope	AK	99766	Terrestrial or Satellite	50 mbps	MTM
	10818	Point Hope Clinic	1729 Qalgi Avenue	Point Hope	AK	99766	Satellite Backup to Anchorage	10 mbps	MTM
	10818	Point Hope Clinic	1729 Qalgi Avenue	Point Hope	AK	99766	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10818	Point Hope Clinic	1729 Qalgi Avenue	Point Hope	AK	99766	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
11	10819	Selawik Clinic	3 Adams Landing	Selawik	AK	99770	Terrestrial or Satellite	50 mbps	MTM
	10819	Selawik Clinic	3 Adams Landing	Selawik	AK	99770	Satellite Backup to Anchorage	10 mbps	MTM

	10819	Selawik Clinic	3 Adams Landing	Selawik	AK	99770	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10819	Selawik Clinic	3 Adams Landing	Selawik	AK	99770	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months
12	10820	Shungnak Clinic	80 Back Street	Shungnak	AK	99773	Terrestrial or Satellite	50 mbps	MTM
	10820	Shungnak Clinic	80 Back Street	Shungnak	AK	99773	Satellite Backup to Anchorage	10 mbps	MTM
	10820	Shungnak Clinic	80 Back Street	Shungnak	AK	99773	Terrestrial, Fiber or Satellite MPLS	50 mbps, 70 mbps, 100 mbps	36 months
	10820	Shungnak Clinic	80 Back Street	Shungnak	AK	99773	Satellite, Terrestrial or Fiber MPLS Backup to Anchorage	10 mbps	36 months