HUMAN SERVICES DEPARTMENT

INCOME SUPPORT DIVISION

REQUEST FOR PROPOSALS (RFP)

Consulting Services



RFP# 17-630-9000-0008

Release Date - April 10, 2017

Amendment 1

Proposal Due Date - May 11, 2017

Request for Proposals # 17-630-9000-0008 is amended as follows:

From:

To:

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I. INTRODUCTION

B. BACKGROUND INFORMATION

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From:

B. BACKGROUND INFORMATION

The Income Support Division (Sean Pearson, Acting Director) administers public assistance programs for New Mexico, including TANF, the Community Services Block Grant, Low Income Home Energy Assistance (LIHEAP) and the Refugee Resettlement programs. In FY 14, 199, 417 families (40,212 individuals), or 1 in 5 New Mexicans, were receiving Supplemental Nutrition Assistance Program (SNAP) benefits, and 13, 816 families (35,890 individuals) were receiving TANF. For LIHEAP, 60,362 families received an average benefit of \$124. ISD personnel are located in one central office in Santa Fe and 35 field offices around the state. There is at least one (1) field office in each of New Mexico's 33 counties, except Los Alamos.

To:

B. BACKGROUND INFORMATION

The Income Support Division (Sean Pearson, Acting Director) administers public assistance programs for New Mexico, including TANF, the Community Services Block Grant, Low Income Home Energy Assistance (LIHEAP) and the Refugee Resettlement programs. ISD personnel are located in one central office in Santa Fe and 33 field offices around the state.

As of February 2017, 255,189 families were receiving Supplemental Nutrition Assistance Program (SNAP) benefits, and 11,966 families were receiving TANF. For LIHEAP, 58,846 households received an average benefit of \$228.

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APPENDIX K

MANDATORY REQUIRMENTS REPONSE FORM MANDATORY REQUIRMENTS REPONSE FORM

Instructions: For each item, indicate in the "Reference" column the location of reference(s) to appropriate discussion(s) of the requirement within the proposal – including items in Binder #3.

| Requirement | Sub Tasks | Business Requirements | Ye s | No | Reference (Page & Paragraph) |
|---|--------------|-------------------------------|---------|----|------------------------------------|
| IV.B.1.a. | i. | Relevant Experience | | | |
| Organizational | ii. | Dates of Service | | | |
| Experience Narrative | iii. | Technical Resources | | | |
| | iv. | Other State Contracts | | | |
| IV.B.2.a. External Organizational References | i. | Required Number of References | | | |
| | ii. | Reference Questionnaire | | | |
| IV.B.2.b. External References for Subcontractor s | i. | Required Number of References | | | |
| | ii. | Reference Questionnaire | | | |
| IV.B.3.a. Financial and Corporate | i. | Financial Statements | | | |
| | ii. | Audit Opinions | | | |

| Stability | iii. | Mergers, Acquisitions, or Sales Disclosure | |
|--|------|--|--|
| +IV.B.4.a. Staff | i. | Core Team | |
| Experience | ii. | Time Allocation | |
| | iii. | Organizational Chart | |
| | iv. | Staff Resumes | |
| IV.B.4.b. Senior Project | i. | Minimum Qualifications | |
| Manager | ii. | Resume | |
| IV.B.4.c. Operations Manager | i. | Resume | |
| IV.B.4.d. Employer Outreach Manager | i. | Resume | |
| IV.B.4.e. Technical Manager | i. | Resume | |
| IV.B.5.a. Core Staff | i. | References | |
| References | ii. | Restrictions | |
| IV.B.6.a. | i. | General | |
| Operational Requirements | ii. | Customer Relations | |
| | iii. | Dedicated Staff | |
| IV.B.6.b. Telephone Service | i. | Toll-Free Telephone Lines | |
| | ii. | Staffing | |
| | iii. | Call Resolution | |
| | iv. | Call Wait-Time | |

| | V. | Bi-lingual service | | |
|---------------------------|-------|---|--|---|
| | i. | Plan Draft | | |
| IV.B.6.c. Project Plan | ii. | Project Management | | |
| | iii. | Final Draft | | |
| | i. | No Cost to Employers | | |
| | ii. | Receipt of Reports | | |
| IV D C 4 | iii. | Employer Written Correspondence | | |
| IV.B.6.d. Employer | iv. | Employer Fax Correspondence | | |
| Reporting | V. | W-4 Employer Reporting | | |
| | vi. | Duplicate Reporting | | |
| | vii. | Reporting Corrections | | |
| | viii. | Technical Assistance | | |
| IV.B.6.f. | i. | Develop Program | | |
| Outreach | ii. | Materials and Mailing | | |
| | iii. | Notification of Changes | | |
| | iv. | Notifying Employers for Improvements | | |
| IV.B.6.f. Outreach | V. | Compliance Analysis and Outreach | | |
| IV.B.6.g. IVR System | vi. | Non-Compliance Notices | | _ |
| | vii. | On-site Employer visits | | |
| | i. | System Requirements | | |
| | ii. | Message Retrieval | | |
| IV.B.6.g. IVR | iii. | Reporting Website | | |

| System IV.B.6.h. | i. | Monthly Summary Report (General) | | |
|---|------|---------------------------------------|--|--|
| Activity Reports | ii. | Monthly Summary Report (Additional) | | |
| IV.B.6.h. | iii. | Annual Report | | |
| Activity Reports | i. | Transmit files | | |
| IV.B.6.i. Provide Data to Other State Agencies IV.B.6.j. Access to Offeror's System | i. | Access for Designated Agency Staff | | |
| IV.B.6.k. Vacancies | i. | Notification | | |
| IV.B.6.I. Non- Compliance | i. | Corrective Action Plan | | |
| IV.B.6.m. Complaints, Conflict, and Issue Reporting | i. | Agency Notification | | |
| IV.B.6.I. Non- Compliance | ii. | Agency Constituent Services | | |
| IV.B.6.n. Inspections | i. | Office Inspections by State | | |
| IV.B.6.p. Billing | i. | Monthly Invoices | | |
| IV.B.7.a. Transition | i. | General Requirements | | |

| Plan | | | | | | |
|----------------------------|-------|---------------------------------------|-----|-----|-----------|---|
| | | | | | | |
| IV.B.6.p. Billing | ii. | Written Plan | | | | |
| | iii. | Plan Content | | | | |
| | iv. | Approval of Written Plan | | | | |
| | V. | Reporting | | | | |
| IV.B.7.a. | vi. | Liaison(s) | | | | |
| Transition Plan | vii. | Security | | | | |
| IV.B.8.a. | viii. | Onsite Senior Project Manager | | | | |
| Turnover Plan | ix. | Follow-up with Incumbent | | | | |
| | Х. | Overruns | | | | |
| | i. | General | | | | |
| | ii. | Written Plan | | | | |
| | iii. | Plan Content | | | | |
| IV.B.8.a. Turnover Plan | iv. | Follow-Up | | | | |
| IV.B.9.a. Cost | V. | Calls Received After Turnover | | | | |
| Proposal | i. | General | | | | |
| | ii. | Cost Response Forms | | | | |
| IV.B.9.a. Cost | iii. | Costs | | | | |
| Proposal | iv. | Annual Transaction Volume | | | | |
| Requirement | V. | Technical Cost Proposal Response Form | | | | |
| IV.C.1.a. Technical | vi. | CPI Adjustment | | | | |
| Assistance | | | Yes | No | Reference | |
| | Sub | Technical Requirements | 168 | INO | | & |

| | Tasks | | Paragraph) |
|---|-------|---------------------------------------|------------|
| | i. | Resources | |
| Requirement | ii. | State and Federal Staff Assistance | |
| IV.C.1.b. Technical | i. | Resources | |
| Support IV.C.2.a. Data | i. | Rights to Data | |
| IV.C.1.b. Technical Support | ii. | Security Plan | |
| | iii. | Backup Plan | |
| IV.C.2.a. Data | iv. | Data Retention | |
| IV.C.3.a. System and | V. | CSED Help Desk | |
| Data Security | i. | Security Plan | |
| | ii. | Virus etc. Protection | |
| | iii. | Password Protection | |
| IV.C.3.a. System and | iv. | Access Restrictions | |
| Data Security IV.C.3.b. | V. | Reports and Magnetic Media Storage | |
| Confidentiality | i. | Agreement | |
| | ii. | Security Plan | |
| IV.C.3.b. Confidentiality IV.C.4.a. Disaster Recovery and Business Continuity | iii. | Safeguarding Information | |
| | iv. | Safeguard Awareness | |
| | V. | Statement of Confidentiality Form | |
| | vi. | Breaches | |
| | vii. | Sharing Information | |

| | viii. | Data Lists | | |
|--|-------|--|------|--|
| | ix. | Safeguarding of Reports and Magnetic Media | | |
| | Х. | Document Destruction | | |
| | i. | Plan | | |
| | ii. | Monthly Backup Procedures | | |
| _ | iii. | Quarterly Updates | | |
| IV.C.4.a. Disaster Recovery and Business | iv. | Documentation | | |
| | V. | Annual Testing | | |
| Continuity | | | | |
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