Request for Proposals
QUITPLAN® Services Vendor

Letter of Intent Due:
February 15, 2013

Full Proposal Due:
April 12, 2013
REQUEST FOR PROPOSALS
QUITPLAN® Services Vendor
Release Feb. 1, 2013

For more information

About ClearWay MinnesotaSM: visit www.clearwaymn.org

About this RFP: All inquiries about this RFP should be directed to Randi Lachter, Senior Cessation Manager, at 952-767-1432 or QUITPLANServices@clearwaymn.org.

ClearWay Minnesota is an independent, nonprofit 501(c)(3) organization seeking to enhance life for all Minnesotans by reducing tobacco use and exposure to secondhand smoke through its grant-making program, individual cessation services and community outreach. ClearWay Minnesota is funded with 3 percent of the 1998 Minnesota tobacco settlement.

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ClearWay Minnesota℠ Request for Proposals: QUITPLAN® Services Vendor

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ClearWay Minnesota’s™ Vision for Tobacco Cessation Services

ClearWay Minnesota is seeking proposals for a QUITPLAN Services Vendor to provide an array of tobacco cessation services and resources to Minnesotans. We seek to engage as many Minnesota tobacco users in the quitting process as possible, with the ultimate goals of increasing quit attempts population-wide, fostering successful quitting and driving down adult smoking prevalence in the state. Key priorities include:

- Reducing barriers to participation (including minimizing the amount of information required to register for services);
- Increasing engagement and broadening focus to include tobacco users who are not yet ready to make a quit attempt within 30 days;
- Being responsive to our consumers by providing the services that callers want and are ready to use;
- Using resources in a cost-effective manner;
- Continuously refining and improving program offerings in order to provide the highest quality services possible; and
- Ensuring a seamless and efficient user experience.

We are striving for a service configuration in which any person living or working in Minnesota will have the ability to access all QUITPLAN Services for which they are eligible by making a phone call to the QUITPLAN Helpline or by visiting the QUITPLAN web portal (www.quitplan.com). The vision for the new service configuration presented in this RFP is our ideal. We recognize that applicants will have different ideas and approaches for best achieving our vision. Applicants should describe how they are able to provide the services described in the detailed scope of work below or present alternative proposals to achieve the same results.

Desired Scope of Services

The Vendor will provide the following for anyone living or working in Minnesota:

- Online registration for all QUITPLAN Services, including the QUITPLAN Helpline;
- Telephone registration for all QUITPLAN Services, including the QUITPLAN Helpline, NRT starter kits, email support program, and text-messaging support program;
- Nicotine Replacement Therapy (NRT) starter kits (two weeks of NRT, not linked to registration for telephone counseling);
- Quitting Guide (self-help workbook);
- Email support program (independent from QUITPLAN Helpline);
- Text-messaging support program (independent from QUITPLAN Helpline);
Online social support (cessation advice) via the quitplan.com web portal, QUITPLAN’s Facebook page or other social networking sites; and

QUITPLAN Helpline (telephone counseling by trained coaches) for Minnesotans who are uninsured or do not have coverage for either telephone counseling or NRT through their insurance, as well as:

- Helpline NRT, contingent on registration for phone counseling (eight weeks of NRT for Medicaid callers; four weeks for other eligible callers).
- Use of email and text-messaging technology as a support to the Helpline counseling program, if available.

Desired QUITPLAN program components are described graphically in Appendix A: QUITPLAN Services Flow Chart. Specific relationships and links between the services are described more fully in the Detailed Scope of Work (see pp. 16-37). Due to the nature of changing technologies, it is anticipated that the selected QUITPLAN Services Vendor will work with ClearWay Minnesota to further develop and refine these services throughout the contract term.

Duration of Funding

The initial contract will be for 22 months (approximately six months start-up and 16 months of service provision) with extensions possible for a maximum of five years, based on performance.

Available Budget

Not to exceed $2.6 million for the 22-month period, paid upon receipt of monthly service invoices.
## Timeline

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb. 7, 2013</td>
<td>Bidders’ call</td>
</tr>
<tr>
<td></td>
<td>Time: 11 a.m. – noon Central Time</td>
</tr>
<tr>
<td></td>
<td>Call-in information: 1-888-290-0578</td>
</tr>
<tr>
<td></td>
<td>Passcode 5373128#</td>
</tr>
<tr>
<td>Feb. 15, 2013</td>
<td>One (1) emailed Letter of Intent due to ClearWay Minnesota</td>
</tr>
<tr>
<td></td>
<td>(<a href="mailto:QUITPLANServices@clearwaymn.org">QUITPLANServices@clearwaymn.org</a>) by 4:30 p.m. Central Time. Late letters will NOT be accepted.</td>
</tr>
<tr>
<td>February 22, 2013</td>
<td>Staff will notify continuing applicants</td>
</tr>
<tr>
<td>April 12, 2013</td>
<td>TWELVE (12) COPIES OF FULL PROPOSALS MUST BE RECEIVED IN THE CLEARWAY MINNESOTA OFFICE BY 4:30 P.M. Central Time.</td>
</tr>
<tr>
<td></td>
<td>• Late proposals will NOT be accepted.</td>
</tr>
<tr>
<td></td>
<td>• Electronic or fax submissions will NOT be accepted.</td>
</tr>
<tr>
<td>May 21, 2013</td>
<td>In-person interviews with finalists at ClearWay Minnesota offices</td>
</tr>
<tr>
<td>July 17, 2013</td>
<td>ClearWay Minnesota Board approval of vendor</td>
</tr>
<tr>
<td>September 1, 2013</td>
<td>Contract begins</td>
</tr>
</tbody>
</table>

**Please note:** This RFP does not obligate ClearWay Minnesota to complete the proposed activities, and ClearWay Minnesota reserves the right to reject all proposals and/or cancel the solicitation if it is not considered to be in our best interest.

## About ClearWay Minnesota™

ClearWay Minnesota is an independent nonprofit organization whose mission is to reduce the harm that tobacco causes Minnesotans. Our activities include helping Minnesotans quit tobacco through QUITPLAN Services, funding research on tobacco’s impact in Minnesota, working with diverse communities to raise their capacity to address tobacco issues, promoting policies that reduce tobacco use and exposure to secondhand smoke, and creating media campaigns to raise awareness of tobacco’s harms. ClearWay Minnesota is a life-limited organization and will transition out of existence in 2023. We are guided by a long-term plan and Legacy Goals that will provide our work with strategic direction throughout our remaining years. We are also guided by three-year Strategic Plans that are developed by our Board and staff. More information can be found at [www.clearwaymn.org](http://www.clearwaymn.org).

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Eligibility Requirements

Applicants must meet the following criteria to be eligible:

1. Either nonprofit or for-profit entities based in the United States.
2. Must comply with ClearWay Minnesota’s Conflict of Interest and tobacco-related policies, and the Minnesota Government Data Practices Act (see Appendix B for a full description of policies).
3. Must currently be providing and have provided telephone counseling to at least 6,000 tobacco users over the last three years.
4. Must be in full compliance with the Health Insurance Portability and Accountability Act (HIPAA), the Health Information Technology for Economic and Clinical Health Act (HITECH) and regulations which may include entering into business associate agreements to facilitate transfer of data, and the Minnesota Health Records Act.
5. Must provide medical oversight and accept all liability for treatment services including but not limited to dosing and recommendation of NRT and/or any other pharmaceutical therapy provided by the tobacco cessation counselors.
6. Must provide medical oversight and accept all liability for providing NRT starter kits through an online application process and/or by phone.
7. Applicant or applicant’s pharmacy must be able to dispense and receive reimbursement for over-the-counter (OTC) NRT to Minnesota Medicaid clients enrolled in the QUITPLAN Helpline. Applicant or applicant’s pharmacy must sign a provider agreement with the Minnesota Department of Human Services (MNDHS). The provider application may be found at http://www.dhs.state.mn.us/provider/forms. The pharmacy must be able to comply with electronic data processing of records and invoice MNDHS for reimbursement. In addition, hard copies of pharmacy service records must be kept for five years.
8. Must provide and support, either in-house or through a subcontractor(s), the digital platforms, systems, processes and protocols necessary to update and maintain web-based ordering and registration systems for delivering NRT starter kits, Quitting Guides, the email support program and the text-messaging support program. Vendor must also follow web best practices and regulations (such as CANSPAM for email).
9. Must have quit rates and other outcome data available on existing telephone counseling program and provide most current outcomes in this proposal including defining how quit rates are measured, for which populations, sampling strategy used, survey data collection mode(s) and response rates.
Application Process

ClearWay Minnesota is committed to selecting the most suitable QUITPLAN Services Vendor through a competitive review process. A two-step application process has been established for this RFP:

1. All interested applicants must first submit a Letter of Intent and signed Eligibility Form by email by 4:30 p.m. Central Time on Feb. 15, 2013.
2. Only applicants who submitted a Letter of Intent and are invited to submit a full proposal will be eligible to submit a full proposal, due to the ClearWay Minnesota office by 4:30 p.m. CDT on April 12, 2013. Instructions for submitting a full application are included below.

Letters of Intent or proposals received after the stated deadlines will be returned to senders and will be ineligible for consideration.

Question and Answer Protocol

Questions regarding this RFP should be directed to Randi Lachter, Senior Cessation Manager, at 952-767-1432 or QUITPLANServices@clearwaymn.org. ClearWay Minnesota staff will answer questions about the RFP and the application process through Ms. Lachter, but will not provide technical assistance on applicants’ proposals. All questions and answers will be posted on the ClearWay Minnesota website (www.clearwaymn.org/QUITPLAN-SERVICES-VENDOR-RFP) for all applicants to review as follows:

Feb. 12: Questions received from Feb. 1 – Feb. 8 at 4:30 p.m. Central Time, including questions asked during the bidders’ call on Feb. 7
March 4: Questions received from Feb. 9 – Feb. 27 at 4:30 p.m. Central Time
March 18: Questions received from Feb. 28 – Mar. 13 at 4:30 p.m. Central Time
March 25: Questions received from Mar. 14 – Mar. 20 at 4:30 p.m. Central Time
April 8: Questions received from Mar. 21 – Apr. 3 at 4:30 p.m. Central Time

Note: Questions received after April 3 will be answered individually, but may not be posted for all applicants to review.
Instructions for the Letter of Intent

One (1) emailed copy of the Letter of Intent and the signed QUITPLAN Services Vendor Eligibility Form (see Appendix C - Forms) must be received by ClearWay Minnesota (QUITPLANServices@clearwaymn.org) by 4:30 p.m. Central Time on Feb. 15, 2013. No fax or paper submissions will be accepted. Full proposals will not be considered from organizations that have not submitted a Letter of Intent and signed Eligibility Form by the stated deadline.

Email the Letter of Intent and Eligibility Form to:

Randi Lachter, M.P.H.
Senior Cessation Manager
ClearWay MinnesotaSM
QUITPLANServices@clearwaymn.org

ClearWay Minnesota staff will review the Letters of Intent. If any of the required information including the required signatures is missing, the applicant may not be eligible to submit a full proposal.

The letter must:
- Be single-spaced, typeset in 12-point Arial font and no longer than two (2) pages;
- Be on your organization’s letterhead;
- Identify the primary contact person and include his or her phone number and email address;
- Include a brief overview of your organization’s history, mission, services and recent accomplishments relevant to your ability to serve as the QUITPLAN Services Vendor for ClearWay Minnesota; and
- Be signed by the organization’s representative who is legally authorized to sign Letters of Intent and proposals.

QUITPLAN® Services Vendor Eligibility Form:
The QUITPLAN Services Vendor Eligibility Form (see Appendix C – Forms) must be signed by your organization’s chief executive responsible for ensuring that your organization meets the eligibility requirements.

Notification Process:
You will receive an email receipt that your letter has been received. Late letters will not be accepted. ClearWay Minnesota will notify all applicants who submit Letters of Intent if they are eligible to submit a full proposal via email by February 22, 2013. Only those potential applicants who meet the eligibility requirements of this RFP, who adequately demonstrate ability to fulfill the role of the QUITPLAN Services Vendor and who provide evidence of adherence to ClearWay Minnesota’s policies (by signing the QUITPLAN Services Vendor Eligibility Form) will be invited to submit a full proposal.
Proposal Response Format

Applicants must submit full proposals in response to this RFP by April 12, 2013 at 4:30 p.m. Central Time. Twelve (12) copies of the full proposal must be received in the ClearWay Minnesota office by 4:30 p.m. Central Time.

- Late proposals will NOT be accepted.
- Electronic or fax proposals will NOT be accepted.
- Proposals must be submitted to:

  Randi Lachter, M.P.H.
  Senior Cessation Manager
  ClearWay Minnesota™
  Two Appletree Square, Suite 400
  8011 34th Avenue South
  Minneapolis, MN 55425
  QUITPLANServices@clearwaymn.org

Proposals must follow the format outlined below, or they may be disqualified.

- The proposal must be typeset in 12-point Arial font and single-spaced.
- The proposal may be printed on both sides of pages, but each side of each page counts as a single page with respect to page limits.
- Page limits for each section are indicated below.
- Use the same section headers and numbering as provided in the Detailed Scope of Work.
- Follow page limits for each section below.
- Printed copies of all attachments, and a CD or DVD of the recorded calls must be included with all 12 copies of the proposal.
- Provide one CD, DVD or flash drive containing electronic versions of the full proposal (required) and all attachments (if possible). If any of the attachments are not available electronically, please note.

Proposals must include the following sections in the order listed here:

**PROPOSAL SECTION DESCRIPTIONS:**

Section 1: Forms ................................................................. p. 11
Section 2: Detailed Scope of Work (50-page limit) .................... p. 11
Section 3: Proposed Budget (no page limit) and Budget Narrative (five-page limit) ......................................................
Section 4: References ............................................................... p. 13
Section 5: Required Attachments (see page limits below) ........ p. 14
Advisory to applicants submitting materials containing proprietary information

ClearWay Minnesota complies with the Minnesota Government Data Practices Act, Minn. Stat. Ch. 13, and the Open Meeting Law, Minn. Stat. Ch. 13D. Under these laws, any information submitted to ClearWay Minnesota is a "public record" unless it is the kind of information that falls into a specific statutory exception. For more information, see Appendix B, Information Protected as “Trade Secret” under the Minnesota Government Data Practices Act.

Section 1: Forms

These forms must be completed electronically and included with the proposal. All forms are included in Appendix C as examples and are available on the ClearWay Minnesota website (www.clearwaymn.org/QUITPLAN-SERVICES-VENDOR-RFP).

1. QUITPLAN Services Vendor Application Form
2. ClearWay Minnesota Contractor/Vendor Acknowledgment of Application Terms and Conditions. By signing the Acknowledgment of Application Terms and Conditions form, you are indicating your understanding of and compliance with all of ClearWay Minnesota’s policies.
3. ClearWay Minnesota Contractor Applicant Financial Questionnaire

Section 2: Detailed Scope of Work

Not to exceed 50 single-spaced pages.

Provide a complete narrative of how you will fulfill the elements outlined in the Scope of Work section (see pp. 16-37).

Section 3: Proposed Budget and Budget Narrative

Use budget worksheet provided as Appendix D. Budget narrative not to exceed five single-spaced pages.

Instructions: Review the detailed descriptions for each budget section provided as Appendix D. Use the budget worksheet template to present the costs for the services requested in the scope of work. Provide a budget narrative describing how you arrived at each subtotal on the worksheet.

Note: an Excel version of the budget worksheet is available on the ClearWay Minnesota website (www.clearwaymn.org/QUITPLAN-SERVICES-VENDOR-RFP).

The bulleted items within each section of the budget instructions (Appendix D) are intended as examples of what should be included in your cost estimates for each area of work. They are NOT intended to limit what can be included, nor are you required to have a line item for each bullet.

- Use only those lines necessary, or add line items as needed to adequately detail and document the project budget.
- When completing the budget worksheet, please verify that all formulas are in place and correct.
- Do not enter anything in the cells containing “0” (zero).
- Do not enter anything in shaded cells containing formulas unless the subtotal for a budget line item cannot be calculated by multiplying # units by the price/unit. In this case, enter the cost for the estimated line item in the appropriate Subtotal cell to override the formula.
- Number of units based on the utilization assumptions have been locked and cannot be changed.

**Development and Service Timeline:**

- Start-up period: six months (September 1, 2013 – February 28, 2014)
- Year 1 service: four months (March 1, 2014 – June 30, 2014)
- Year 2 service: 12 months (July 1, 2014 – June 30, 2015)

Use these utilization estimates which are based on past usage in Minnesota and information gathered from other states. Percentages are approximate.

<table>
<thead>
<tr>
<th>QUITPLAN® Services Utilization Assumptions</th>
<th>March 1, 2014 - June 30, 2014 (4 mos.)</th>
<th>July 1, 2014 - June 30, 2015 (12 mos.)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total adult tobacco users in Minnesota:</strong></td>
<td>625,000</td>
<td></td>
</tr>
<tr>
<td>Estimated calls to QUITPLAN Services (3.0 percent of Minnesota’s adult tobacco users)</td>
<td>6450</td>
<td>18950</td>
</tr>
<tr>
<td>General inquiry calls (includes proxies but not health plan transfers or QUITPLAN Helpline registrants)</td>
<td>5.3%</td>
<td>350</td>
</tr>
<tr>
<td>Materials only calls (Quitting Guide)</td>
<td>1.4%</td>
<td>100</td>
</tr>
<tr>
<td>Calls resulting in registration for QUITPLAN Services (standalone email and/or text) - (no Helpline)</td>
<td>5.3%</td>
<td>350</td>
</tr>
<tr>
<td>Warm transfer of health plan members to health plan quitlines</td>
<td>4.0%</td>
<td>250</td>
</tr>
<tr>
<td>Registration for QUITPLAN Helpline (intake only)</td>
<td>18.5%</td>
<td>1200</td>
</tr>
<tr>
<td>NRT starter kit ordering calls</td>
<td>65.5%</td>
<td>4200</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUITPLAN® Helpline</th>
<th>1200</th>
<th>3500</th>
</tr>
</thead>
<tbody>
<tr>
<td>QUITPLAN Helpline Intake</td>
<td>100%</td>
<td>1200</td>
</tr>
<tr>
<td>QUITPLAN Helpline Call 1</td>
<td>90%</td>
<td>1050</td>
</tr>
<tr>
<td>QUITPLAN Helpline Call 2</td>
<td>55%</td>
<td>700</td>
</tr>
<tr>
<td>QUITPLAN Helpline Call 3</td>
<td>35%</td>
<td>400</td>
</tr>
</tbody>
</table>

- 12 -
<table>
<thead>
<tr>
<th><strong>QUITPLAN® Services Utilization Assumptions</strong></th>
<th>March 1, 2014 - June 30, 2014 (4 mos.)</th>
<th>July 1, 2014 - June 30, 2015 (12 mos.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>QUITPLAN Helpline Call 4</td>
<td>25% 300</td>
<td>875</td>
</tr>
<tr>
<td>QUITPLAN Helpline Call 5</td>
<td>15% 175</td>
<td>525</td>
</tr>
<tr>
<td>Fax referrals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fax referrals reached/enrolled</td>
<td>30% 175</td>
<td>550</td>
</tr>
<tr>
<td>Fax referrals unreachable/declined</td>
<td>70% 425</td>
<td>1250</td>
</tr>
<tr>
<td>Fax referrals feedback to providers</td>
<td>100% 600</td>
<td>1800</td>
</tr>
<tr>
<td>Proactive re-engagement calls</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proactive re-engagement calls reached</td>
<td>30% 125</td>
<td>375</td>
</tr>
<tr>
<td>Proactive re-engagement calls unreachable</td>
<td>70% 275</td>
<td>850</td>
</tr>
<tr>
<td><strong>NRT starter kits (4 percent of Minnesota Adult tobacco users; 50 percent ordering online and 50 percent by phone)</strong></td>
<td></td>
<td>8400 25000</td>
</tr>
<tr>
<td>2 weeks patches</td>
<td>70% 5800</td>
<td>17500</td>
</tr>
<tr>
<td>2 weeks gum</td>
<td>16% 1400</td>
<td>4000</td>
</tr>
<tr>
<td>2 weeks lozenge</td>
<td>14% 1200</td>
<td>3500</td>
</tr>
<tr>
<td><strong>NRT starter kit follow-up calls</strong></td>
<td>8400 25000</td>
<td></td>
</tr>
<tr>
<td>NRT starter kit follow-up calls reached</td>
<td>30% 2500</td>
<td>7500</td>
</tr>
<tr>
<td>NRT starter kit follow-up calls unreachable</td>
<td>70% 5900</td>
<td>17500</td>
</tr>
<tr>
<td><strong>Helpline NRT (4 weeks)</strong></td>
<td>825 2450</td>
<td></td>
</tr>
<tr>
<td>4 weeks patches</td>
<td>70% 550</td>
<td>1700</td>
</tr>
<tr>
<td>4 weeks gum</td>
<td>16% 150</td>
<td>400</td>
</tr>
<tr>
<td>4 weeks lozenge</td>
<td>14% 125</td>
<td>350</td>
</tr>
<tr>
<td><strong>Helpline NRT (8 weeks for Medicaid)</strong></td>
<td>70 210</td>
<td></td>
</tr>
<tr>
<td>8 weeks patches</td>
<td>72% 50</td>
<td>150</td>
</tr>
<tr>
<td>8 weeks gum</td>
<td>14% 10</td>
<td>30</td>
</tr>
<tr>
<td>8 weeks lozenge</td>
<td>14% 10</td>
<td>30</td>
</tr>
<tr>
<td><strong>Email messaging program registrants</strong></td>
<td>1700 5000</td>
<td></td>
</tr>
<tr>
<td>Register by phone</td>
<td>15% 250</td>
<td>750</td>
</tr>
<tr>
<td>Register online</td>
<td>85% 1450</td>
<td>4250</td>
</tr>
<tr>
<td><strong>Text-messaging program registrants</strong></td>
<td>1500 4000</td>
<td></td>
</tr>
<tr>
<td>Register by phone</td>
<td>15% 225</td>
<td>600</td>
</tr>
<tr>
<td>Register online</td>
<td>85% 1275</td>
<td>3400</td>
</tr>
</tbody>
</table>

**Section 4: References**

Provide name, title, organization, address, phone and email for **three references** who can speak to your organization’s ability to fulfill the scope of work presented in this RFP.
Section 5: Required Attachments

Follow page limits for each item.

1. quitplan.com web portal and database
   a. A flow chart (graphic representation) of your proposed online registration process for all QUITPLAN Services. **Two pages maximum.**

2. Quitting Guide
   a. Copies of the Quitting Guide(s) (English and Spanish versions) currently sent to tobacco users. **No page limit.**

3. Email and text-messaging support programs
   a. A sample email message currently in use, or a template email. Include content, graphics and formatting. **One page maximum.**
   b. A sample of text messages currently in use. **One page maximum.**

4. QUITPLAN Services by Phone
   a. A flow chart (graphic representation) of your proposed phone-based registration process for all QUITPLAN Services. **Two pages maximum.**

5. QUITPLAN Helpline
   a. Provide de-identified recorded copies of actual calls/counseling sessions on either CD-ROM or DVD for each of the following call types (for a total of four recorded sessions). If possible, it is preferred that the first three call examples below pertain to the same program participant. At least one call must include the NRT dosing process:
      - Initial call and registration for services;
      - Initial counseling/assessment call (may be part of the initial call);
      - Follow-up counseling call; and
      - Follow-up counseling call with a member of a population requiring special or tailored counseling protocols.
   b. Include the following items:
      i. Copies of all printed participant materials used to support the counseling program and NRT provision (excluding the Quitting Guide already provided)
      ii. Copies of materials available for friends and family of tobacco users
      iii. Copies of materials available in Spanish (excluding the Quitting Guide already provided), for pregnant women and other special populations for whom you have tailored materials

6. Organizational Structure and Staffing
   a. An organizational chart for the division or department responsible for QUITPLAN Services Vendor operations. **One page maximum.**
   b. A biographical sketch for the account manager(s) who will be assigned to the ClearWay Minnesota account. **One page maximum per account manager.**
   c. An outline of your training program for coaches (both initial and ongoing). **Three pages maximum.**

7. Reporting for QUITPLAN Services
   a. Examples of the standard reports you provide to clients, or a sample report you could develop, for each of the QUITPLAN Services, including delivery schedule and method (electronic preferred). Include weekly, monthly and quarterly reports.

8. Data Transfers and Evaluation
a. A standard data extract for evaluation purposes, with dummy data if needed, and a data dictionary. *Six pages maximum.* If no standard data extracts exist, provide a description of the type of individual-level data you have produced for other clients and your capacity to develop extracts for this project. *Three page maximum for the description.*

9. Quality Assurance
   a. A sample or actual quality assurance report. *No page limit.*

10. Letters of Support from subcontractors describing their qualifications and ability to perform the tasks delineated if applicable. *Three page maximum for each letter.*
Your detailed response should:

1. Demonstrate your understanding of and capacity to operationalize ClearWay Minnesota’s vision for QUITPLAN cessation services (see p. 4).
2. Clearly indicate any alternative approaches and the rationale for each.
3. Describe if you are in the process of developing some of the capabilities, tools or services contained in your proposal and the approximate timeline for completion.
4. Clearly indicate those pieces of work you cannot fulfill.

If applicants do not possess the capacity to accomplish the entire Scope of Work in-house, they may subcontract components of the work but subcontracting is not required. Applicants that propose subcontracting must identify the subcontractor(s) and the role each would perform. Subcontractors must be located in the United States and provide a letter of support that describes their qualifications to perform the tasks delineated.

**Note**: Required attachments (listed in Section 5, pp 14-15 above) do NOT count toward the page limits for each section of the Detailed Scope of Work.

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I. quitplan.com Web Portal and QUITPLAN® Services Database

OVERVIEW
ClearWay Minnesota currently maintains a quitplan.com website. The quitplan.com website will be redesigned and maintained by ClearWay Minnesota to serve as an access point (web portal) for all QUITPLAN Services. ClearWay Minnesota will be responsible for the design, look, feel and basic programmatic information provided.

Working together, the QUITPLAN Services Vendor and ClearWay Minnesota will ensure that visitors to quitplan.com will:

- Be able to select any and all QUITPLAN Services using a user-friendly interface;
- Experience a streamlined registration process for any and all QUITPLAN Services for which they are eligible; and
- Have a seamless and intuitive user experience.

Ideally, visitors will be able to return to quitplan.com multiple times and select the same or different services. Opting out of services should be as easy and intuitive as registering for services, and the process for doing so should be easily accessible on the quitplan.com site. Users needing help with the registration process should be able to access real-time technical assistance during the Vendor’s operating hours.

Once built, the registration system should be accessible to the Vendor’s staff while on the phone with callers. In keeping with our vision (see p. 4), individuals who call QUITPLAN Services should be able to register for any of the QUITPLAN program components via phone (see p. 26, QUITPLAN® Services by Phone).

The QUITPLAN Services database(s) maintained by the Vendor should include all data elements collected for all QUITPLAN Services users, including Helpline registrants. Certain data elements will be required to register for each QUITPLAN Services program component, but collecting data presents a potential barrier for participants, and it is important that they be required to enter their registration data no more than once. Final decisions about required data elements for registration will be made in partnership with ClearWay Minnesota during the implementation phase of the project, once a contract has been executed with the selected Vendor.

ClearWay Minnesota will add additional web-based content and tools to the quitplan.com portal, including but not limited to articles, gadgets, apps, videos and blog posts. ClearWay Minnesota is interested in learning about any existing content or tools that applicants are willing to make available on the quitplan.com portal.

We want a collaborative working relationship between ClearWay Minnesota, our web developer and the Vendor to create a new, user-friendly online experience and ensure that the necessary data flow seamlessly into a database maintained by the Vendor.
VENDOR RESPONSIBILITIES FOR THE QUITPLAN.COM WEB PORTAL AND QUITPLAN SERVICES DATABASE

The QUITPLAN Services Vendor will be responsible for providing and maintaining the online registration platform and process for all QUITPLAN Services via quitplan.com and housing and maintaining the QUITPLAN Services database(s). All registration data for all QUITPLAN Services, including the QUITPLAN Helpline, will reside with the Vendor. The Vendor will collaborate with ClearWay Minnesota to build the registration process consistent with QUITPLAN Services branding. Registration and databases must be served from a HIPAA-compliant environment. The Vendor can adapt or develop the data collection/registration system in-house or by sub-contracting with a vendor of its own choosing. Proposals should reflect the option(s) that best meet the applicant’s current experience and capacity.

The Vendor should provide a web registration process that is mobile-compatible with all devices (e.g., tablet, mini, mobile), and compatible with the quitplan.com platform. Web registration processes should be built in a format that allows for the wrapping of quitplan.com branding, including navigation elements and footer links. All pages and services described below must be provided in both English and Spanish.

The Vendor is also expected to provide real-time technical assistance to users needing help with the registration process during the Vendor’s operating hours.

RFP RESPONSE ITEMS FOR QUITPLAN.COM WEB PORTAL AND QUITPLAN® SERVICES DATABASE (eight pages maximum)

1. Describe your experience and capacity to adapt or create an online registration system and user database reflecting ClearWay Minnesota’s vision for web-based access to services.

2. Describe how you will:
   a) Program and implement a process for registering for any QUITPLAN program in both English and Spanish on the quitplan.com web portal.
      i. Describe your overall strategy for creating a user-friendly registration process available on quitplan.com to meet the goals of this RFP.
      ii. Include a flow chart (graphic representation) of your proposed online registration process for all QUITPLAN Services as an attachment.
      iii. Provide a description of your approach to data collection and minimizing barriers to entry.
      iv. Describe your vision of what the tobacco user’s experience will be like using the quitplan.com web portal.
      v. Specify which portions of the work will be done by your organization in-house, and which will be done through a subcontractor(s).
      vi. Detail the web programming languages you would use to build (or adapt) the registration interfaces as well as how you would handle error messaging and user satisfaction.
      vii. Include whether the database software is off-the-shelf or proprietary, hierarchical or relational.
b) Build the user experience so that it is mobile and tablet compatible, as well as compatible with the quitplan.com web portal.

c) Create a database, or use an existing database(s), for data capture.
   i. Describe the database(s).
   ii. If multiple databases are needed, discuss how they will be integrated and/or synchronized and the time frame for integration/synchronization.
   iii. ClearWay Minnesota's preference is that complete data are available to QUITPLAN Services Vendor staff in real time. Confirm that this is feasible; if not, describe what is feasible.

d) Link/combine the database records of any individual using multiple QUITPLAN Services over time (e.g., someone signs up for text messaging in March, and registers for the QUITPLAN Helpline in August).

e) Use linked records to track utilization, shipments, eligibility, etc., for each individual.
   i. Include details specific to tracking the amount of NRT shipped to a given individual over time.
   ii. For specifics on eligibility and limits for NRT, accessed both online and via the QUITPLAN Helpline, see *NRT Decision Rules, Appendix E*.

f) Ensure Vendor staff have access to registration system(s) for all programs and can register callers for any and all programs while they are on the phone.

3. Database Software and Security

a. Describe your database capacity and indicate whether database(s) have or what will be done to ensure the necessary capacity to service the Minnesota account.

b. Describe your data security procedures. Indicate the level of security the database(s) would have.
   i. How will confidentiality and privacy be maintained?
   ii. How will you ensure compliance with the federal HIPAA and HITECH laws and regulations and the Minnesota Health Records Act?
   iii. If your current systems have ever been hacked into or if there has ever been a security breach of your current system, please provide details.

c. Describe the hardware that would house this system.

d. Describe backup, storage and disaster recovery procedures.

4. Describe your capacity for providing technical support in real time to Minnesotans as they navigate the online registration process for any or all of the services listed below.

5. Describe your ability to and process for translating web-based content into Spanish.

6. Describe any and all web-based content (including, but not limited to, articles, gadgets, apps, videos, testimonials, blog posts, etc.) that you would be willing to provide to ClearWay Minnesota for posting on the quitplan.com web portal.

II. Provision of Nicotine Replacement Therapy (NRT)

ClearWay Minnesota will provide Nicotine Replacement Therapy (NRT) to all eligible tobacco users with either an NRT starter kit or through the QUITPLAN Helpline. The QUITPLAN Helpline and NRT starter kits are viewed as two distinct interventions with different audiences and purposes. Helpline NRT supports and enhances the telephone counseling program supervised by a Quit Coach. NRT starter kits open the door to a
possible, self-guided quit attempt. Starter kits also support those wanting to give NRT or quitting a try, and might move tobacco users towards a future quit attempt.

**NRT STARTER KITS OVERVIEW**
Two weeks of NRT ("starter kit") will be made available to anyone who lives or works in Minnesota and fulfills eligibility requirements (e.g., age, residence, medical eligibility, limits on NRT provided in a 12-month period). (Note: See Appendix E: NRT Decision Rules.) NRT starter kit options likely will be limited to nicotine patches and one flavor each of nicotine gum and nicotine lozenge to reduce potential confusion for tobacco users. During implementation, the QUITPLAN Services Vendor will need to work with ClearWay Minnesota to finalize NRT options and dosing protocols.

NRT starter kits will be available through an online application system via the quitplan.com web portal or by calling QUITPLAN Services. To receive an NRT starter kit, tobacco users must provide a phone number and agree to receive one call from a QUITPLAN Services coach. Shipment of NRT is not contingent on completing this call.

**QUITPLAN® HELPLINE NRT OVERVIEW**
ClearWay Minnesota will continue providing NRT to eligible uninsured and underinsured1 tobacco users who register for the QUITPLAN Helpline (eight weeks to Medicaid callers, four weeks to uninsured and underinsured1 callers). Nicotine patches, gum and lozenge will be provided. We anticipate providing multiple flavors of gum and lozenges via the Helpline, but a final decision will be made during implementation.

**VENDOR RESPONSIBILITIES FOR PROVISION OF NRT**
The QUITPLAN Services Vendor is responsible for:
- Programming and maintaining the online application system for the NRT starter kits;
- Tracking all NRT sent to tobacco users, linking records for multiple NRT requests for the same individual, and enforcing eligibility criteria and yearly limits on the amount of NRT provided (see Appendix E: NRT Decision Rules);
- Fulfilling all eligible NRT requests;
- Making all follow-up calls to tobacco users requesting NRT starter kits (follow-up calls will cover any questions or problems users are having with NRT, and will provide a brief introduction to the other QUITPLAN Services offerings); and
- Identifying and preventing fraud.

**RFP RESPONSE ITEMS FOR PROVISION OF NRT**
(three pages maximum)

1. Describe how you will:
   a. Take on medical oversight for provision of NRT, both NRT starter kits and Helpline NRT.

1 Underinsured = individuals whose insurance does not cover telephone counseling and/or NRT for tobacco cessation.
b. Operationalize the NRT decision rules (Appendix E) in both a web-based and a phone format, and identify processes for helping users select the appropriate dose and type of NRT.

c. Fulfill or oversee fulfillment of two-week NRT starter kit requests received either via the online application system or by phone.

d. Fulfill or oversee fulfillment of Helpline NRT:
   i. Describe your ability to dispense four weeks of NRT to QUITPLAN Helpline registrants per enrollment in the program.
   ii. Describe your ability to dispense eight weeks of NRT per enrollment to Minnesota Medicaid participants enrolled in the QUITPLAN Helpline through an eligible pharmacy provider enrolled with the MNDHS as a provider. The medication expense should be billed to the MNDHS. (See p. 32, Scope of Work, Section VIII, Part 8: QUITPLAN® Helpline Response Items/Billing Capabilities).

e. Make follow-up calls to all individuals requesting free NRT starter kits either online or through QUITPLAN Services by phone. Address questions or concerns they have with respect to their NRT. Provide a brief introduction to the other QUITPLAN Service offerings as appropriate.

2. Describe how you would provide assistance and/or information via phone or web about other QUITPLAN services to those deemed ineligible for an NRT starter kit.

3. Describe your experience with anti-fraud measures and your approach to reducing fraud related to NRT or other similar products.

4. Describe the support services that would be available to callers who receive OTC NRT through QUITPLAN Services whether they receive it through the Helpline or as an NRT starter kit (e.g., answering questions about negative NRT side effects).

5. ClearWay Minnesota will include material with NRT starter kits, and will change that material periodically. Materials might include, but would not be limited to, promotional fliers describing other QUITPLAN Services, highlighting new features of existing services, or informational/motivational materials related to using NRT to quit smoking.
   a. Describe your capacity to insert materials with NRT shipments, including options from fliers to posters to full-size (8.5x11-inch booklet) Quitting Guide.
   b. Describe the process you use (or would use) to identify Spanish-language preference and include relevant materials or instructions in Spanish with the NRT starter kits.

6. Provide as attachments copies of any types of printed materials that are currently included in NRT shipments, e.g., medication use instructions, posters, fliers, etc. (not including the Quitting Guide, which is handled in a separate section, or package inserts from the manufacturer).
III. Online Access to the QUITPLAN® Helpline

OVERVIEW

The quitplan.com web portal will contain information about and instructions for how to access the QUITPLAN Helpline. Access will be through the toll-free number 1-888-354-PLAN, “click to call,” AND an online registration page. Note: the “click to call” feature and online registration for the QUITPLAN Helpline are to be mutually exclusive, where the online registration option will be available ONLY when the “click to call” feature is not. This is intended to reduce confusion for users.

VENDOR RESPONSIBILITIES FOR ONLINE ACCESS TO THE QUITPLAN® HELPLINE

The QUITPLAN Services Vendor is responsible for programming, operating and maintaining a “click to call” feature and an online registration process for the QUITPLAN Helpline. The Vendor should be able to turn both mechanisms on or off upon request.

RFP RESPONSE ITEMS FOR ONLINE ACCESS TO THE QUITPLAN® HELPLINE (two pages maximum)

1. Describe your experience with and ability to create, maintain and operate the following:
   a. A “click to call” feature for the QUITPLAN Helpline
      i. “Click-to-call” is a feature where a potential Helpline user can request an immediate (or near immediate) call-back from the QUITPLAN Helpline by “clicking” a button on the quitplan.com web portal and providing a phone number where they can be reached.
      ii. Vendor must have the capacity to turn this feature “off” during periods of high call volume or when Helpline staff are not available to make outbound calls.
      iii. Include what will be seen on caller ID when the callback occurs.
   b. Online registration for the QUITPLAN Helpline
      i. Online registration is a feature where potential Helpline users can enter key registration data online and receive a call-back from the QUITPLAN Helpline within 24 hours.
      ii. Online registration data must be linked to the QUITPLAN Helpline database so users do not have to provide information multiple times.
      iii. Online registration will be accessible ONLY when the “click to call” feature is not: during periods of high call volume or when the Helpline is closed.
IV. Quitting Guide

OVERVIEW
ClearWay Minnesota will provide a Quitting Guide to Minnesotans in three ways:

1. Mail a hard copy if requested to all QUITPLAN Helpline registrants as part of the telephone counseling program.
2. Mail a hard copy to those who order the guide through a web-based ordering system on the quitplan.com portal, or call the QUITPLAN Helpline (for those not interested in telephone counseling).
3. Post an electronic document (PDF and/or interactive format) on the quitplan.com web portal.

VENDOR RESPONSIBILITIES
The QUITPLAN Services Vendor is responsible for:

- Production (all content and printing);
- Any revisions and updates of the Quitting Guide;
- Fulfillment of all requests for printed copies of the Quitting Guide;
- Providing an electronic version of the Quitting Guide for the quitplan.com site; and
- Tracking requests for Quitting Guides and enforcing annual mailing limits.

RFP RESPONSE ITEMS FOR QUITTING GUIDE (two pages maximum)

1. Existing English and Spanish Quitting Guides
   a. Provide as an attachment(s) the Quitting Guide(s) (English and Spanish versions) that you currently send to tobacco users.
   b. Identify the reading level of the current Quitting Guides.
   c. If no Quitting Guide is currently available in either English or Spanish, describe your capacity for creating one.
   d. Describe any electronic interactive version of your Quitting Guides that people can “complete” online if one currently exists, or your plans to create such a version, if applicable.

2. Spanish Quitting Guide
   a. Describe the development and translation process used to create the Spanish-language guide.

3. Confirm your willingness and ability to make a PDF version of the Quitting Guide available to ClearWay Minnesota for posting on the quitplan.com web portal.

4. Confirm your ability to fulfill requests for the Quitting Guide to tobacco users who opt not to register for the QUITPLAN Helpline.

5. Maintenance
   a. Describe your process for and the frequency of revising and updating the content contained within the English and Spanish Quitting Guides, including how you would involve ClearWay Minnesota staff in the process.
6. Supplementary Information  
   a. Confirm your capacity to include additional materials with the Quitting Guide, such as promotional fliers for other QUITPLAN Services.

V. Email and Text-Messaging Support Programs

**OVERVIEW**

QUITPLAN Services will include standalone email and text-messaging support programs, separate from text messages or email that may be offered with the QUITPLAN Helpline. Helpline participants – along with all others using QUITPLAN Services – will have access to the standalone email and text-messaging support programs. Ideally, email and/or text technology will also be used to support QUITPLAN Helpline participants as part of the Helpline coaching intervention (e.g., call reminders, between-call check-ins with coaches, etc.). Therefore, Helpline participants may be receiving email and/or text messages from BOTH the standalone email/text programs AND as part of the Helpline intervention.

- The email support program is conceived as a series of informational emails tailored to either the tobacco user’s stage of change, quit date or both. The primary focus of the email content should be moving tobacco users along the stages of change and supporting them in their quit attempts.
  * Minnesotans will be able to sign up for email messages on the quitplan.com web portal, or by calling QUITPLAN Services.

- The text-messaging program is conceived as being modeled after the NCI SMOKEFREETXT program. Ideally, the text-messaging program would be interactive, with the capacity to respond to “texts for help” (e.g., keywords such as “CRAVE,” “SLIP,” “MOOD”). At a minimum, the text-messaging program should be one-directional with a series of “daily tips” for quitting based on stage of change.
  * Minnesotans will be able to sign up for text messages on the quitplan.com web portal, or by calling QUITPLAN Services. (Note: If “short code” registration is available, this will serve as a third way to sign up for text messages.)

**VENDOR RESPONSIBILITIES FOR EMAIL AND TEXT-MESSAGING PROGRAMS**

As previously noted, the QUITPLAN Services Vendor will create, maintain and operate web-based registration pages/systems for both the email and the text-messaging support programs, and will maintain the participant databases. The Vendor will be responsible for developing content for both messaging programs, and for delivering all messages. The Vendor must be able to incorporate additional content from ClearWay Minnesota as requested in both emails and texts.
RFP RESPONSE ITEMS FOR EMAIL AND TEXT-MESSAGING SUPPORT PROGRAMS (three pages maximum)

1. Describe your overall strategy for email and text support to meet the goals of this RFP.

2. Describe standalone and/or quitline-related email support programs currently available to clients.
   a. Include types of emails, purpose, content strategies, frequency, one-way or two-way communication, etc.
   b. Include a sample email as an attachment, with formatting.

3. Describe standalone and/or quitline-related text-messaging support programs currently available to clients.
   a. Include types of texts, purpose, content strategies, frequency, level of interactivity, etc.
   b. Provide sample text messages as an attachment.

4. Describe your approach to following best practices and regulations for email and text-messaging (e.g., CANSPAM).

5. Describe how the email and text-messaging participant databases will be maintained (if not previously addressed), how bounce-backs or undeliverable messages will be managed, etc.

6. Describe any unique capabilities of the text-messaging system, including surveys, customization, audience, or segmenting content.

7. Share evaluation findings of current email or text-messaging programs if available.

8. Describe your ability to incorporate content from ClearWay Minnesota in the emails or text messages (e.g., promotion of text-messaging/email support, promotion of NRT starter kits, promotion of The QuitCash Challenge™, etc.)

VI. Online Social Support

OVERVIEW
ClearWay Minnesota currently maintains a Facebook page for QUITPLAN Services. We intend to provide online social support from a Quit Coach on the QUITPLAN Facebook page and through the QUITPLAN web portal (including but not limited to online chat groups or other discussion forums). Other social media sites may also be used as the medium evolves.

VENDOR RESPONSIBILITIES FOR ONLINE SOCIAL SUPPORT
The QUITPLAN Services Vendor will need to provide counselors/coaches to participate in and respond to cessation-related online social support offerings and interactions. We

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2 The QuitCash Challenge is an annual quit-and-win contest promoted and administered by ClearWay Minnesota. It is designed to increase the number of tobacco users thinking about quitting, and making active quit attempts. In the past, the QuitCash Challenge has been promoted by traditional mass media methods. ClearWay Minnesota is interested in promoting the contest using text and email messages prior to the start of the contest each year.
estimate five to seven hours per week of coaching time will be needed. The specific format and details will be determined during implementation.

**RFP RESPONSE ITEMS FOR ONLINE SOCIAL SUPPORT**  
**(one page maximum)**

1. Describe the experience and capacity of your coach(es) to respond to quitting-related questions submitted via online chat groups, discussion forums, the QUITPLAN Facebook page, or other social media.

**VII. QUITPLAN® Services by Phone**

**OVERVIEW**

ClearWay Minnesota envisions that participants will have the ability to access all QUITPLAN Services for which they are eligible by making a phone call to the QUITPLAN Helpline or by visiting the QUITPLAN web portal (www.quitplan.com). Participants will be able to access QUITPLAN Services by phone in the following ways:

- By calling 1-888-354-PLAN (the direct QUITPLAN Services phone number);
- By calling either the national English or planned Spanish portals, 1-800-QUIT-NOW and 1-855-DEJALO-YA (1-855-335-3569) (Note: Spanish portal estimated launch date March 2013); or
- By visiting quitplan.com and selecting either a “click to call” or online registration option (generating an outbound call from QUITPLAN Services to the user).

Telephone counseling combined with NRT will continue to be the most intensive of the QUITPLAN Services. However, under the proposed plan, QUITPLAN Services Vendor staff will provide callers with information about all QUITPLAN Services. The staff who answer QUITPLAN Services calls will need to be able to guide callers through the process of identifying program components to match their needs. We prefer that coaches answer initial calls to QUITPLAN Services to facilitate immediate engagement in coaching when desired, although we are open to alternative staffing arrangements. The Vendor is expected to work closely with ClearWay Minnesota to craft initial prompts, scripting and staff training to match callers who are most likely to engage in the telephone counseling program with the QUITPLAN Helpline, while respecting a caller’s preferences.

Those interested in telephone counseling should be assessed for eligibility for the QUITPLAN Helpline, including annual registration limits and insurance coverage for telephone counseling and medications. Health plan members will be warm-transferred to their health plans’ quitlines. Those not interested in telephone counseling should receive descriptions of the other QUITPLAN Services. Vendor staff should be able to

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3 ClearWay Minnesota partners with Minnesota health plans to provide telephone counseling services to people who live or work in Minnesota through the Call it Quits Collaborative. Tobacco users who have insurance through one of the six Call it Quits member health plans are warm transferred from QUITPLAN Services directly to their health plan’s quitline.

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access the registration/application pages for the NRT starter kit, the Quitting Guide and the email and text-messaging options to register callers for any combination of programs while on the phone.

VENDOR RESPONSIBILITIES FOR QUITPLAN® SERVICES BY PHONE

The Vendor will be responsible for:

- Staffing QUITPLAN Services appropriately to facilitate an efficient and responsive process of identifying the service(s) callers are interested in and registering them for those services;
- Providing sufficient telephony, software and other infrastructure for incoming calls for QUITPLAN Services;
- Processing incoming calls through 1-800-QUIT-NOW and the national Spanish portal (1-855-DEJALO-YA; 1-855-335-3569); and
- Assessing callers’ health insurance status and making warm transfers to the appropriate health plan quitlines.

RFP RESPONSE ITEMS FOR QUITPLAN SERVICES BY PHONE
(six pages maximum)

1. Access to QUITPLAN® Services

Describe your process for:

a. Providing a termination number for 1-800-QUIT-NOW consistent with NCI transfer and telephony protocols.
b. Providing a termination number for the national Spanish language portal consistent with NCI transfer and telephony protocols.

2. Days and Hours of Operation

a. Indicate the days and hours you can provide live response to Minnesota’s callers in both English and Spanish. Minimum requirements are 7 a.m. – midnight Central Time, seven days per week.
b. Indicate on which holidays, if any, you will not be able to provide service.
c. Describe your after-hours service including recorded messages in both English and Spanish and voicemail capacity.
d. Describe your protocol for returning voicemail messages.

3. Call Volume Monitoring and Adjustments

a. Describe your monitoring plan to identify peak call times and how you adjust staffing as needed.
b. Describe your proposed process and options for handling periods of high call volume for both English and Spanish (e.g., changing welcome message, voice prompts, directing people to quitplan.com, changing the number of intake questions, limiting services for a short time, etc.) and how you would work with ClearWay Minnesota to determine the best approach.
c. Describe what happens when call volumes exceed line capacity.
4. QUITPLAN® Services Technical Requirements

Describe the technology and systems your organization would use to operate the following aspects of QUITPLAN Services:

a. Phone and Voicemail System
   i. Describe your transfer capacity (e.g., live/warm transfers to Health Plan quitlines, Asian Smokers’ Quitline and others as needed).
   ii. Indicate what will appear on a participant’s caller ID when they receive a call from your organization. Describe your capacity for customizing caller ID to appear as “QUITPLAN Services” for both incoming and outgoing calls.

b. Call / Program Management Tool
   i. Describe the system used to schedule calls and track usage per participant (i.e., call dates, lengths and number completed).

5. Registration for QUITPLAN® Services

a. Describe your overall strategy to leverage all tools available through QUITPLAN Services by Phone to meet the goals of this RFP.

b. Describe your proposed process for welcoming callers to QUITPLAN Services, describing the Helpline, assessing interest and moving into Helpline intake or to discussing other services.

c. Include a flow chart (graphic representation) of your proposed phone-based registration process for all QUITPLAN Services as an attachment.

d. Describe your approach to data collection and minimizing barriers to entry.

e. Provide your proposal for staffing QUITPLAN Services to answer incoming calls. If staff other than trained cessation coaches will answer calls, provide rationale.

f. Describe your ability to assess insurance status and conduct a warm transfer of callers to the appropriate health plan quitline as needed.

VIII. QUITPLAN® Helpline

OVERVIEW

Once a tobacco user indicates interest in telephone counseling/coaching, eligibility should be assessed. If not already speaking to a coach at intake, tobacco users should be provided immediate access to a trained cessation counselor or coach, who should in turn have immediate access to the registration information and/or system.

Uninsured and underinsured\(^4\) Minnesotans are eligible to enroll in the QUITPLAN Helpline twice per twelve-month period, and can re-enroll immediately following “completion” of a Helpline enrollment. Minnesotans with health insurance will be warm-transferred to their health plans’ quitlines for enrollment in phone coaching.

\(^4\) Underinsured = individuals whose insurance does not cover telephone counseling and/or NRT for tobacco cessation.
ClearWay Minnesota plans to provide up to five calls per registered tobacco user. However, counseling content should be front-loaded into the first two or three calls, given most Helpline users participate in two or three calls on average. All users should be OFFERED additional calls at the end of every counseling session, but counselors should present the offer in such a way that users do not feel pressured to continue with counseling if they do not feel it would be useful.

Throughout the coaching process, the other QUITPLAN Services should be discussed and information about how to access them should be provided for those who are interested. Rules will need to be developed in collaboration with ClearWay Minnesota for those receiving NRT through the Helpline regarding their eligibility for NRT starter kits. Helpline enrollees who request a hard copy will be sent a Quitting Guide or receive information on how to access a PDF copy online.

All Helpline participants will have access to the standalone email and text-messaging programs, as described in Section V above. Ideally, email and/or text technology will also be used to support QUITPLAN Helpline participants as part of the Helpline coaching intervention (e.g., call reminders, between-call check-ins with coaches, etc.). Therefore, Helpline participants may be receiving email and/or text messages from BOTH the standalone email/text programs AND as part of the Helpline intervention.

Eligible callers can receive NRT as part of their QUITPLAN Helpline enrollment. See p. 19, Section II, Provision of NRT, for more details.

**Call it Quits Referral Program**
The Call it Quits Referral Program is a statewide collaboration between six of Minnesota’s major health plans who provide quitline services (Blue Cross and Blue Shield of Minnesota, HealthPartners, Medica, Metropolitan Health Plan, PreferredOne and UCare) and ClearWay Minnesota (providing quitline services for the uninsured and underinsured). The program is administered by Blue Cross and Blue Shield of Minnesota. The program enables health care providers to use a single form and fax number to refer patients who use tobacco to quitline support. All Minnesota residents — whether covered by a health plan or not — have access to free support to quit. The goal of this collaboration is to make it easier for providers to connect their patients to appropriate tobacco quitline services.

Minnesota quitline service providers, including the QUITPLAN Services Vendor, will receive faxed referral forms from a central triage entity (currently Alere Wellbeing). After making attempts to reach referred tobacco users, the Vendor is required to fax results to the referring clinic (e.g., “enrolled in the program,” “declined services,” “unable to reach”). In addition, results for all referrals must be submitted monthly as a data extract via secure FTP site to a central database.

**VENDOR RESPONSIBILITIES FOR THE QUITPLAN® HELPLINE**
The Vendor will be responsible for:
Development and updating of all coaching protocols;
Delivery of all telephone-based coaching for tobacco cessation;
Processing incoming referrals via fax or electronic submission and making outbound attempts to reach referred tobacco users;
Faxing results of call attempts back to Call it Quits referring clinics and reporting all Call it Quits referral activity to the central database monthly via data extract to a secure FTP site;
Working with ClearWay Minnesota to develop a process for integrating information about all other QUITPLAN Services into the QUITPLAN Helpline protocols;
Billing health plans and Medicaid as agreements evolve.

(Note: All database-related development or modification for the QUITPLAN Helpline should be discussed under Section 1 of the Scope of Work quitplan.com web portal and databases).

RFP RESPONSE ITEMS FOR QUITPLAN® HELPLINE
(10 pages maximum)

Our vision for all QUITPLAN Services, including the QUITPLAN Helpline, is to help tobacco users at all stages move along the continuum towards quitting. Previously, the Helpline focused primarily on tobacco users ready to quit in the next 30 days. In your response, discuss how your interventions assist all types of tobacco users (e.g., smokers, smokeless tobacco users, those not ready to quit, those already quit, those planning to quit, those who have relapsed).

1. Counseling theory
   a. Describe the theoretical model and principles that your program follows.

2. Counseling practice
   a. Describe your experience with, capacity to and proposed process for front-loading counseling content into the first two or three calls.
   b. Describe how coaches would assess interest in further calls after calls 2, 3, and/or 4.
   c. Describe your recommended call timing (i.e., timing in relation to quit date and spacing between calls) and provide rationale as to why this approach is recommended.
   d. Describe the scheduling process, number of call attempts and process used to reach enrollees for their scheduled calls.
      i. If a caller is not reached, what happens?
      ii. If a currently registered caller calls into the Helpline, what happens? How is that call recorded in the system?
      iii. Describe your process for determining when each “call” has been completed and/or closed out and how you distinguish between calls where a tobacco user spoke to a coach and call attempts where the tobacco user was never successfully reached.
e. Describe any unique counseling protocols for special populations.

f. Describe your definition or how you would determine when a QUITPLAN Helpline participant has completed the program.
   - Confirm your willingness to work with ClearWay Minnesota to determine definitions and indicators for “completion” of the telephone counseling program and eligibility for re-enrollment.

g. As an example of how you currently apply your theoretical model and guiding principles in practice, provide de-identified recorded copies of actual calls/counseling sessions on either CD-ROM or DVD for each of the following call types (for a total of 4 recorded sessions). If possible, it is preferred that the first three call examples below pertain to the same program participant. At least one call must include the NRT dosing process.
   - Initial call and registration for services;
   - Initial counseling/assessment call (may be part of the initial call);
   - Follow-up counseling call; and
   - Follow-up counseling call with a member of a specific population.

h. Provide the most current completer and intention-to-treat quit rates at seven months post registration for your programs using seven-day and 30-day point prevalence. Please provide quit rates for a population that closely resembles that served by ClearWay Minnesota; i.e., uninsured tobacco users who receive NRT but NOT prescription medications.

3. Relapse Prevention
   a. Describe how you address relapse prevention in your counseling program, including when and how this subject is addressed.
   b. Describe the support services you have available for program participants in between scheduled calls.

4. Priority Populations
   In accordance with the organization’s Strategic Plan, ClearWay Minnesota strives to increase the utilization of QUITPLAN Services by priority populations. ClearWay Minnesota defines priority populations as those that have been disproportionately targeted by the tobacco industry and/or have prevalence rates higher than the general population.
   a. Describe special or tailored protocols and materials used to provide telephone counseling to any sub-population of tobacco users. Refer to the materials you included in the Required Attachments, item 5b, if applicable. Culturally appropriate counseling must be available for Latino callers in both Spanish and English.
   b. Describe how calls from Spanish-speaking callers are handled. What voice prompts do they hear, who answers the phone, and how do Spanish speakers enroll in services (e.g., at the time of the initial call, scheduled call back, other)?
   c. Describe the number of hours counseling can be provided in languages other than English, and which languages. Counseling in Spanish is required.
   d. Describe TTY and/or video relay capabilities.
5. Call it Quits Referral Program

Describe your process for:

a. Receiving paper fax referrals from health care providers via a central triage entity (currently Alere Wellbeing), entering the necessary data into the Helpline database and making outbound calls to reach referred tobacco users.

b. Receiving email or other electronic referrals from electronic medical records, and making outbound calls to those who are referred. Include the number of call attempts made to reach referrals.

c. Faxing results of call attempts to reach referred tobacco users to the referring clinic (e.g., “enrolled in the program,” “declined services,” “unable to reach”).

d. Submit referral results monthly as a data extract via secure FTP site to a central database.

6. Printed Materials for the QUITPLAN® Helpline

a. Include as attachments the following items:
   i. Copies of all printed participant materials used to support the counseling program and NRT provision (excluding the Quitting Guide already described);
   ii. Copies of materials available for friends and family of tobacco users; and
   iii. Copies of materials available in Spanish (excluding the Quitting Guide already described), for pregnant women and other special populations for which you have tailored materials.

b. Describe how printed materials are used to support the counseling process.

c. Describe the protocol for identifying which materials are best suited for a participant and when they are sent to him or her.

7. QUITPLAN® Helpline Participant Communications

a. List and provide brief descriptions for each communication (e.g., attempt letters, follow-up letters, reminders) sent to Helpline program participants.

8. Billing Capabilities

ClearWay Minnesota requires that the QUITPLAN Services Vendor seek reimbursement from the Minnesota Medicaid Program for NRT for eligible QUITPLAN Helpline participants. ClearWay Minnesota is just beginning to work with the state Medicaid program on the issue of Federal administrative match for quitline services. ClearWay Minnesota also works to enter into agreements with Minnesota health plans to pay for counseling and/or NRT provided by the QUITPLAN Helpline for their self-insured members with no NRT coverage.

a. Describe your experience collecting and submitting the information required to seek reimbursement from Medicaid for NRT.

b. Describe your ability to track and report on Medicaid enrollees for billing purposes and to work with ClearWay Minnesota and the Minnesota Medicaid
Program to obtain the 50 percent Federal Medicaid match for quitline counseling services.

c. Describe your ability to collect member IDs/numbers from members of Minnesota’s major health plans and work with ClearWay Minnesota to invoice the health plans for counseling and/or NRT provided to those members.

9. Helpline Transition Requirements

Should the selected QUITPLAN Services Vendor be other than the current Helpline vendor, there will be up to a six-month (September 2013 through February 2014) period during which the new contract will overlap with the current contract in order to facilitate start-up and transition. The current vendor will complete provision of counseling services to already registered clients.

a. Describe how you will work with the current vendor to transition the Helpline to your service. Include relevant examples of transitioning other state quitline services.

IX. Organizational Structure and Staffing

(two pages maximum)

1. Include in the attachments an organizational chart for the division or department responsible for QUITPLAN Services Vendor operations.
2. Describe the executive management team for the division or department responsible for Vendor operations.
3. For each department or responsible area below, describe the number of staff members, title and qualifications of the person or people responsible for that department or area, and their scope of work:
   a. Client Services: Describe how the ClearWay Minnesota account will be serviced (e.g., account manager(s)). Include the name of the account manager(s) who will be assigned to the ClearWay Minnesota account. Provide a biographical sketch for the account manager(s) as an attachment.
   b. Information Technology
   c. Telephone Intake Staff
   d. Technical Support Staff for the online registration process
   e. Counseling
      i. Describe your:
         - Hiring requirements for coaches;
         - Approach to training, monitoring, and advancement for coaches; and
         - Initial and ongoing training for staff to better serve members of cultural groups or other sub-populations.
      ii. Provide an outline of your training program (both initial and ongoing) as an attachment.
   f. Data Management, Integrity and Reporting
   g. Quality Assurance
X. Changes to QUITPLAN® Services

OVERVIEW
Changes are likely to occur during the contract for the QUITPLAN Services Vendor. Such changes may include but are not limited to modifications to web-based or printed material content, use of new technologies, counseling session content or frequency, NRT dosing and fulfillment, scripting or other service requirements. Some of these changes may require additional programming or IT time.

RFP RESPONSE ITEMS FOR CHANGES TO QUITPLAN® SERVICES
(one page maximum)
1. Describe the process that is followed when ClearWay Minnesota requests changes to services. Provide up to two relevant examples from your work with other clients, including time frames for the change process.

XI. Additional Consultation for Cessation Services and Activities

OVERVIEW
In addition to the cessation-related counseling support that QUITPLAN Services Vendor coaches will provide via Online Social Support platforms, ClearWay Minnesota will need to consult with specific staff members from the selected QUITPLAN Services Vendor (e.g., key clinical, operational and programmatic staff). The selected vendor is expected to provide expert cessation consultation at an hourly rate on topics that might include, but are not limited to:
- Identification of articles, messaging, videos, etc., for the quitplan.com web portal
- Identification of gadgets or apps for the quitplan.com web portal
- Feedback on content developed by ClearWay Minnesota or its contractors
- Quarterly or bi-annual meetings with key clinical, operational and programmatic staff to review innovations in technology, treatment or other cessation issues

RFP RESPONSE ITEMS FOR ADDITIONAL CONSULTATION
(one page maximum)
1. Describe your experience providing similar consultative services to other clients. Indicate the type of personnel who would be available to provide such assistance on an as-needed basis, including a brief summary of their areas of expertise.

XII. Proactive Re-Engagement of QUITPLAN® Services Users

OVERVIEW
ClearWay Minnesota envisions reaching out to prior users of QUITPLAN Services to re-engage them in new quit attempts and inform them of new service offerings. QUITPLAN Services Vendor staff will make outbound calls to prior users of QUITPLAN Services, pending time and resource availability. The Vendor and ClearWay Minnesota will work to determine the best approach to proactive re-engagement including the number of calls and selection criteria for the target audience.
RFP RESPONSE ITEMS FOR PROACTIVE RE-ENGAGEMENT  
(two pages maximum)  
1. Describe your experience with proactive re-engagement strategies.  
2. Describe the process and protocol you would recommend for re-engaging with previous QUITPLAN Services users.  
3. Describe the permissions and notifications required of QUITPLAN users to re-contact them in this way.

XIII. Reporting for QUITPLAN® Services  
OVERVIEW  
We require weekly and monthly reports to track utilization and key metrics, as well as quarterly quality assurance reports. Data and data reports must be delivered electronically and are considered ClearWay Minnesota’s property.

RFP RESPONSE ITEMS FOR REPORTING FOR QUITPLAN® SERVICES (two pages maximum)  
1. Describe and provide as attachments examples of the standard reports you provide to clients, or a sample report you could develop, for each of the QUITPLAN Services, including delivery schedule. Include weekly, monthly and quarterly reports.  
2. Describe how you would adapt your reports to incorporate all QUITPLAN Services, and the types of variables that would be included to maximize use of the reports for program monitoring and improvement.  
3. Describe your capacity and process for creating new reports to fit client needs.

XIV. Data Transfers and Evaluation  
OVERVIEW  
ClearWay Minnesota is committed to evaluating all QUITPLAN Services through a third party evaluator selected by ClearWay Minnesota. The QUITPLAN Services Vendor is required to supply electronic data such as individual-level demographics, tobacco use history, medical screening information, program utilization, and NRT distribution information to ClearWay Minnesota’s evaluator on a regular basis (e.g., monthly or quarterly). In addition, the Vendor is required to respond to ad hoc data requests for special evaluation studies that may occur up to a few times a year. Data and data reports are considered ClearWay Minnesota’s property.

RFP RESPONSE ITEMS FOR DATA TRANSFERS AND EVALUATION  
(three pages maximum)  
1. Confirm your ability to comply with the following requirements:  
   a. Agree to a third party evaluation conducted by a vendor selected by ClearWay Minnesota.  
   b. Describe your experience with and willingness to provide individual-level raw data to an external evaluator for the purposes of evaluation and research.
c. Enter into a business associate and/or confidentiality agreement as needed with ClearWay Minnesota’s evaluator and Minnesota Health Plans to allow for transfer of data.

d. Provide data to the evaluator as requested in compliance with the federal HIPAA and HITECH law and regulations and the Minnesota Health Records Act.

e. Change types of data collected to align with ClearWay Minnesota’s monitoring and evaluation needs.


g. Work with the third party evaluator to pull and/or report on data required for CDC’s National Quitline Data Warehouse (NQDW) and NAQC’s Annual Survey.

2. Exporting Data: Describe the following for both standard and customized reports and data extractions:
   a. The process used for exporting individual-level data
   b. The form in which it is exported
   c. Provide a sample standard data extraction and data dictionary as an attachment.
   d. Quality Control process undertaken before releasing data

3. Describe your capacity to partner with ClearWay Minnesota staff and vendors to conduct research on quitline-related questions.

XV. QUITPLAN® Brand and Promotions/Advertising

Overview
The QUITPLAN Services brand was developed from a thorough review of existing literature, formative research and testing with consumers. ClearWay Minnesota created the QUITPLAN Services brand to effectively promote its cessation programs and serve consumers. The QUITPLAN Services brand creates a compelling way for smokers to think about cessation services. All brand touch points – that is, anything that represents the QUITPLAN Services brand, from advertising to the services themselves – must reflect the QUITPLAN Services brand position and attributes.

Brand Position
- QUITPLAN Services deliver the expertise and tools that help people quit smoking.

Brand Attributes
- Smart and proven
- Straightforward
- Respectful
- Compassionate
- Professional

ClearWay Minnesota will be responsible for all advertising, promotions and marketing of QUITPLAN Services. ClearWay Minnesota provides regular updates to vendors on the planned media and promotions of QUITPLAN Services.
VENDOR RESPONSIBILITIES
ClearWay Minnesota seeks vendors who are committed to incorporating and strengthening the QUITPLAN Services brand. Consistent and correct use of the brand will help us achieve the shared goals of recruiting Minnesotans to QUITPLAN Services and helping them quit tobacco use. Vendors are expected to work with ClearWay Minnesota on the branding of all QUITPLAN Services programs.

RFP RESPONSE ITEMS FOR QUITPLAN® BRAND AND PROMOTIONS/ADVERTISING (two pages maximum)

1. Ideally, ClearWay Minnesota would like all program materials, Web content, application/ordering systems and communications to be fully branded with the QUITPLAN brand. Describe how you would re-brand the different types of materials you send to program participants including but not limited to printed program materials and participant communications. For those materials for which full branding is not feasible, please explain why and provide an alternative plan.

2. Provide a clear statement of your experience and ability to comply with the following branding requirements:
   a. Calls to QUITPLAN must be answered as QUITPLAN Services.
   b. The quitline serving Minnesota callers must be referred to as the QUITPLAN Helpline. This includes how calls are answered and referenced during counseling and on printed materials.
   c. The web portal and web-based registration/ordering system(s) must be referred to as quitplan.com. This URL is registered by ClearWay Minnesota. This includes the URL, all linked pages and any references online, by phone, email or text message, print materials, etc.
   d. All printed materials must meet QUITPLAN identity standards. A copy of the ClearWay Minnesota Style Guide is available from Randi Lachter (QUITPLANServices@clearwaymn.org). The Vendor must agree to follow ClearWay Minnesota’s current style guide and subsequent updates.
   e. Approval by ClearWay Minnesota is required for all enrollee materials.

XVI. Quality Assurance
(two pages maximum)

1. Describe your proposed approach to continuous quality assurance and quality improvement for all service offerings included in this RFP and database management. Include emerging trends in the field of quality assurance/quality improvement that could be incorporated into ClearWay Minnesota’s service offerings.

2. Provide as an attachment a sample or actual quality assurance report.

3. Confirm you are willing to accept random quality checks by ClearWay Minnesota staff, other vendors, and evaluators in the form of secret shopper calls, recorded or observed calls, or other types of quality checks.
Review Process

Proposals will be reviewed by a panel of experts with content knowledge in quitlines and tobacco cessation. The review panel will also include ClearWay Minnesota staff.

Finalists will be asked to travel to Minneapolis for an in-person interview with ClearWay Minnesota staff on May 21, 2013. Applicants who reach the finalist stage will be asked to engage in a more detailed discussion about some aspects of their proposals at the time of the in-person interview. Specific questions will be provided to the applicants in advance of the interview.

After the in-person interview, ClearWay Minnesota staff will make funding recommendations to the ClearWay Minnesota Board of Directors, which makes the final decision.

SELECTION CRITERIA

Reviewers will review each application using the following criteria and weights. Presenting your detailed response on the scope of work and deliverables in this order will help facilitate the scoring process.

<table>
<thead>
<tr>
<th>Proposal Section</th>
<th>Maximum number of points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detailed Scope of Work</td>
<td>(170 points total)</td>
</tr>
<tr>
<td>quitplan.com Web portal and QUITPLAN® Services Database</td>
<td>30</td>
</tr>
<tr>
<td>Provision of NRT</td>
<td>15</td>
</tr>
<tr>
<td>Online Access to the QUITPLAN® Helpline</td>
<td>5</td>
</tr>
<tr>
<td>Quitting Guide</td>
<td>5</td>
</tr>
<tr>
<td>Email and Text-Messaging Support Programs</td>
<td>10</td>
</tr>
<tr>
<td>Online Social Support</td>
<td>5</td>
</tr>
<tr>
<td>QUITPLAN® Services by Phone</td>
<td>15</td>
</tr>
<tr>
<td>QUITPLAN® Helpline</td>
<td>30</td>
</tr>
<tr>
<td>Organizational Structure and Staffing</td>
<td>15</td>
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<tr>
<td>Changes to QUITPLAN Services</td>
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<tr>
<td>Additional Consultation</td>
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<tr>
<td>Proactive Re-engagement</td>
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<tr>
<td>Reporting for QUITPLAN® Services</td>
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<tr>
<td>Data Transfers and Evaluation</td>
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<td>QUITPLAN® Brand</td>
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<tr>
<td>Quality Assurance</td>
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<tr>
<td>Proposed Budget and Budget Narrative</td>
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<tr>
<td>Required Attachments</td>
<td>(points included in their respective sections)</td>
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TOTAL possible points = 220
Appendix A – QUITPLAN® Services Flow Chart

**PHONE SERVICE USER EXPERIENCE**

1-888-354-7526

**WELCOME**
- Live Counselor

**Assess interest in QUITPLAN Helpline and other services**
- **YES**
  - Live or work in Minnesota?
  - **YES**
    - Texting program
    - Quitting guide
    - NRT starter kit
    - Online communities
    - Email support program
      - Online forum
    - **NO**
    - Short code
      - **YES**
        - US MAIL
        - **NO**
      - PDF
- **NO**

**Other QUITPLAN services**
- **YES**
  - Would you like me to connect you?
    - **YES**
      - Other state
    - **NO**
      - Thank you / goodbye
- **NO**

**Register data collected by counselor/coach**

**Key**
- **Decision**
- **Outcome**

*As part of coaching, all Helpline enrollees will be offered all other QUITPLAN Services.*
SMOKE-FREE WORKPLACES
Organizations receiving contract funding from ClearWay Minnesota must provide a statement indicating that the worksite of the organization is smoke-free, unless tobacco use in the worksite is prohibited by law, or is an explicit component of a research treatment center.

CONTRACTOR/VENDOR INTERACTION WITH TOBACCO COMPANIES
ClearWay Minnesota will not contract with a tobacco company, its parent or subsidiaries. ClearWay Minnesota will actively seek to contract with individuals and companies that provide the best possible service and have no present or anticipated relationships with tobacco companies, their parents or subsidiaries, or currently work for, nor in the past two years, have worked for any company with significant revenue (15 percent or more) from tobacco-related products.

ClearWay Minnesota generally will not contract with an individual or company that currently provides mission-related services to a tobacco company, its parent or its subsidiary. Mission-related services include cessation, research, public relations, advertising, legal, consulting and educational services. ClearWay Minnesota may choose to contract with a company that currently provides mission-related services to a tobacco company, if the quality of the work is deemed significantly better than that provided by its competitors, and if the individuals working on the ClearWay Minnesota project have not worked directly with the tobacco company in the last 12 months, and agree that they will not work directly with the tobacco company while working on the ClearWay Minnesota project.

For the purposes of this Policy, tobacco is defined as commercially manufactured products containing tobacco, and does not include traditional, cultural, spiritual and ceremonial sacred tobacco use by American Indians.

CONTRACTOR/VENDOR COMPLIANCE WITH MINNESOTA GOVERNMENT DATA PRACTICES ACT
If ClearWay Minnesota contracts with a private sector person or entity to “perform any of its functions,” the contract must require the contractor/vendor to agree to be subject to the Minnesota Government Data Practices Act (Minn. Stat. § 13) with respect to any data “created, collected, received, stored, used, maintained, or disseminated” by the private contractor/vendor.

The contractor/vendor agrees to comply with the Act with respect to the agreement data as if it were a government entity (as defined in the Act). Agreement data is considered
public information under the Act, unless it can be demonstrated that any given agreement data should not be treated as public information, including but not limited to that such agreement data is a “trade secret” pursuant to Minn. Stat. §13.37, subd. 1 or “nonpublic business data” pursuant to Minn. Stat. §13.591, subd. 1. Contractor/vendor understands that pursuant to Minn. Stat. §13.05, subd. 11, the remedies provided in §13.08 of the Act apply to the contractor/vendor.

INFORMATION PROTECTED AS “TRADE SECRET” UNDER THE MINNESOTA GOVERNMENT DATA PRACTICES ACT

Trade secret information is classified as “not public” under the Minnesota Government Data Practices Act (DPA) (Private, if data on individuals, and nonpublic, if data not on individuals), Section 13.37, subdivision 2.

Must Claim Trade Secret Protection

If an individual or organization believes that a document it submits to ClearWay Minnesota contains trade secret information, the individual or organization must do the following:

1) Clearly mark the information with the words “trade secret.”
2) Explain in writing how the information meets each of the three requirements in the definition of trade secret information.

Proprietary information is not defined or classified under the DPA. Therefore, proprietary information would be public data and available to anyone upon request. This is important because if someone marks something as “proprietary,” it is not the same as marking it “trade secret.”

In the event that contractor/vendor receives a request for agreement data under the Act, contractor/vendor agrees to notify ClearWay Minnesota promptly upon such request. In the event that contractor/vendor reasonably desires that certain agreement data requested not be disclosed, contractor/vendor shall give ClearWay Minnesota notice requesting that ClearWay Minnesota withhold specific agreement data from being disclosed. Such notice shall identify the specific agreement data that contractor/vendor desires be withheld, and the statutory basis for claiming that such agreement data is not public information.

ClearWay Minnesota will not reimburse contractor/vendor for any of contractor/vendor’s attorneys’ fees, costs or any other expenses incurred in responding to Act requests or requests for information from any government agency.

CONTRACTOR/VENDOR COMPLIANCE WITH CLEARWAY MINNESOTA’S™ CONFLICT OF INTEREST POLICY

ClearWay Minnesota will not give grants to, or enter into contracts with, a ClearWay Minnesota Board Member or ClearWay Minnesota employees or the family members of either while the person is serving ClearWay Minnesota and for one year after the person ceases to be a Board Member or employee of ClearWay Minnesota.
If a family member or relative of a Board Member is, or becomes, affiliated with an organization that has a grant or contract with ClearWay Minnesota, that organization must:

a) Certify in writing to ClearWay Minnesota that the family member or relative will not solicit, supervise, manage, administer or have a financial interest in the ClearWay Minnesota grant or contract for the duration of that grant or contract;

b) Submit the certification within 30 days after the disclosure of the relationship to the affiliated organization or a written request from ClearWay Minnesota; and

c) Promptly update the certification if the status of the family member or relative changes.

“Family members” of a person are the person’s spouse or domestic partner, parents, stepparents, siblings, children, stepchildren, and spouses or domestic partners of the person’s children and stepchildren. “Relatives” of a person are the person’s aunts and uncles.

**CONTRACTOR/VENDOR LIABILITY AND INSURANCE REQUIREMENTS**

Contractor/vendor shall be solely responsible for obtaining, and any expense in obtaining, medical, dental, life, liability and all other insurance for contractor/vendor for the Term. Contractor/vendor understands that it is not covered by the insurance policies of ClearWay Minnesota. Contractor/vendor shall be responsible for obtaining, at contractor/vendor’s sole expense, licenses and permits usual and necessary for performing the Services.

**CONTRACTOR/VENDOR FINANCIAL INFORMATION**

ClearWay Minnesota may request detailed financial information from applicants to verify the organization’s good financial standing and capacity to successfully complete the ClearWay Minnesota project.

A summary of this financial due diligence review is shared with staff and/or the external reviewers. However, submitted financial documents are normally not shared with external reviewers in order to protect applicant’s nonpublic or proprietary information.
All forms are included within the RFP, and are also available online at www.clearwaymn.org/QUITPLAN-SERVICES-VENDOR-RFP. You may download a copy of each form and fill it out on your computer. Use your tab key to move from field to field.
QUITPLAN® Services Vendor Eligibility Form

To be submitted with the Letter of Intent

Applicants must meet the following criteria to be eligible:

1. Either nonprofit or for-profit entities based in the United States.
2. Must comply with ClearWay Minnesota’s Conflict of Interest and tobacco-related policies, and the Minnesota Government Data Practices Act (see Appendix B for a full description of policies).
3. Must currently be providing and have provided telephone counseling to at least 6,000 tobacco users over the last three years.
4. Must be in full compliance with the Health Insurance Portability and Accountability Act (HIPAA), the Health Information Technology for Economic and Clinical Health Act (HITECH) and regulations which may include entering into business associate agreements to facilitate transfer of data, and the Minnesota Health Records Act.
5. Must provide medical oversight and accept all liability for treatment services including but not limited to dosing and recommendation of NRT and/or any other pharmaceutical therapy provided by the tobacco cessation counselors.
6. Must provide medical oversight and accept all liability for providing NRT starter kits through an online application process and/or by phone.
7. Applicant or applicant’s pharmacy must be able to dispense and receive reimbursement for over-the-counter (OTC) NRT to Minnesota Medicaid clients enrolled in the QUITPLAN Helpline. Applicant or applicant’s pharmacy must sign a provider agreement with the Minnesota Department of Human Services (MNDHS). The provider application may be found at http://www.dhs.state.mn.us/provider/forms. The pharmacy must be able to comply with electronic data processing of records and invoice MNDHS for reimbursement. In addition, hard copies of pharmacy service records must be kept for five years.
8. Must provide and support either in-house or through a subcontractor(s) the digital platforms, systems, processes and protocols necessary to update and maintain web-based ordering and registration systems for delivering NRT starter kits, Quitting Guides, the email support program and the text-messaging support program. Vendor must also follow web best practices and regulations (such as CANSPAM for email).
9. Must have quit rates and other outcome data available on existing telephone counseling program and provide most current outcomes in this proposal including defining how quit rates are measured, for which populations, sampling strategy used, survey data collection mode(s) and response rates.

This form must be signed by your organization’s chief executive responsible for ensuring that your organization meets the eligibility requirements.

Signature: __________________________________ Date: ______________________
Title: __________________________________________
QUITPLAN® Services Vendor Application Form

Date (month/day/year): / / 

Title of Project: QUITPLAN Services Vendor

General Information

Legal Name of Organization: 

Address: 

County: Telephone: Fax: 

Project Information

Name of Project Director: 

Title: Email: 

Telephone: Fax: 

Address:
Name of Financial Officer:

Title: Email:

Telephone: Fax:

Address:

Is your organization an IRS not-for-profit?  □ Yes  □ No

☐ IRS 501(c)(3)  ☐ IRS 501(c)(4)  ☐ IRS 501(c)(6)

Federal Tax ID number:  State Tax ID number:

Dollar Amount Being Requested from ClearWay Minnesota℠:

Organization’s total annual budget:

Checks to be made payable to:

Name:

Address:

City:  State:  Zip
ClearWay Minnesota℠ Contractor/Vendor Acknowledgment of Application Terms and Conditions

The undersigned, on behalf of an organization applying for a contract from ClearWay Minnesota, represents that he or she has the authority to execute this and related contract agreements on behalf of the applicant organization. The undersigned further acknowledges and agrees to the following in applying for a contract or any other funding from ClearWay Minnesota:

**The Application Process**

- Applicant represents and warrants in submitting a proposal that it has complied with and/or shall comply with all applicable federal, state and local laws, rules and regulations.
- No application for funding will be considered unless it is complete and fully complies with criteria set forth in the applicable request for proposals.
- No application for funding will be considered unless and until this “Acknowledgment of Application Terms and Conditions” is signed and returned to ClearWay Minnesota’s authorized representative.
- Requests for Applications, Proposals, or Qualifications may be withdrawn or modified by ClearWay Minnesota at any time during the application process.

**The Review Process**

- Applicant understands that any attempt to contact a review panel member to discuss the application under review during the review process will disqualify them from receiving current and future Clearway Minnesota funding. This disqualification period will commence immediately upon notification to the applicant.
- Not all proposals will be funded. ClearWay Minnesota has the sole right and discretion to establish funding eligibility criteria and to select or reject proposals according to ClearWay Minnesota’s view of proper program priorities.
- No person or organization has a right to or expectation of such funding, except as provided in a fully approved and executed contract agreement. Board-approved funding may be withdrawn (or project approval may be rescinded) if the parties fail to reach agreement during the contract negotiation process.
- If applicant is an existing or prior ClearWay Minnesota grantee or contractor, applicant acknowledges that ClearWay Minnesota will provide the panel of reviewers information about previous experience with the applicant.

**Conditions for Funding**

- Failure to comply with the terms of a contract may result in the termination of funding and, in certain cases, may require the contractor/vendor to return funds previously received, including funds already disbursed.
- Applicant warrants that no member of its staff or Board of Directors is, or, during the term of any contract, will be, a relative of a member of the staff or Board of Directors of ClearWay Minnesota.
Applicant acknowledges that proposals submitted become public information, subject to the Minnesota Government Data Practices Act, at the time they are presented to the ClearWay Minnesota Board of Directors. Pricing and service agreements of proposals are considered public information, unless applicant can demonstrate that the information is a “trade secret” or “nonpublic business data” as defined by the Act.

Applicant acknowledges and will comply with ClearWay Minnesota’s policies and directives concerning: conflict of interest; relationships with the tobacco industry and related businesses; smoke-free workplaces; financial standing; and data practices, if they are awarded a contract.

During the period of time that applicant’s proposal is under consideration for funding by ClearWay Minnesota, the applicant agrees to inform ClearWay Minnesota immediately of any material change affecting the capacity of the applicant organization to meet the requirements and responsibilities outlined in the Request for Proposal or the contract proposal as submitted.

Withholding of Funds or Termination After Contract Execution
ClearWay Minnesota, at its sole option, also may terminate contract agreements at any time if:

- Contractor/vendor uses contract amounts for any purpose other than as specified in the contract agreement.
- Contractor/vendor breaches the contractor/vendor conditions set forth in the Contract agreement.
- In ClearWay Minnesota’s sole discretion, ClearWay Minnesota believes that contractor/vendor becomes unable to carry out the purposes of the project, or ceases to be an appropriate means of accomplishing the purposes of the project.
- If contractor/vendor uses contract amounts for purposes that conflict with ClearWay Minnesota’s mission, goals, and policies.
- If contractor/vendor, or any person working on the project commits, or is found to have committed, misconduct in science (as defined in Regulations of the Public Health Service, 42 C.F.R. Part 50) with regard to research to be performed under the agreement [if applicable].

Signature: ___________________________ Date (month/day/year): / / 

Name and title (please print):

Representing (organization’s legal name):
ClearWay MinnesotaSM Contractor Applicant Financial Questionnaire

The purpose of this Financial Questionnaire is to verify the organization’s good financial standing and capacity to successfully complete the ClearWay Minnesota project. Only one copy of each of these documents is required. ClearWay Minnesota staff will treat all personal financial information as confidential and will not disclose, use, or discuss confidential personal financial materials except to verify applicant eligibility. Personal confidential financial material is not subject to disclosure under the Minnesota Government Data Practices Act.

Fill out the following Questionnaire as it applies to your organization and provide the materials requested.

Organization Name: ____________________________________________________________________

Name and title of person completing questionnaire: ____________________________________________

Date: _______________________

Name and title of the top financial representative of the organization: ______________________________

____________________

Please respond to each question.

1. Please provide a resume of the top financial representative of the organization. Please verify that s/he has never been convicted nor is a charge pending for fraud, misrepresentation, or theft.

2. Are there any lawsuits, judgments, or liens pending against your organization that directly impact the ability to administer the funds if awarded, or is it currently under investigation by any entity? 
   _____ Yes  _____No

   If yes, please provide details (attach a sheet if necessary):
   __________________________________________________________________________
   __________________________________________________________________________

3. Please provide contact information for three trade references.

4. Has your organization ever been denied a surety bond, filed for bankruptcy or been insolvent? 
   _____ Yes  _____No  (If yes, please attach an explanation)

5. Please provide the most recent audited financial statements for the applicant entity proposed to complete this project. (If you don’t conduct an audit please submit the latest IRS tax filing for the applicant entity. Sole proprietors need to send their most recent IRS Form 1040, excluding any schedules, and should redact their Social Security number on the Form 1040.)

6. Is your organization in good standing with your Secretary of State’s Office? 
   _____ Yes  _____No  _____N/A

   If yes, please attach a copy of your Certificate of Good Standing. Please provide an explanation if it is not available or is not applicable to your organization. ClearWay Minnesota must be notified if there is a change in your good standing status.

____________________

Signature of person completing questionnaire                      Date

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Appendix D – QUITPLAN® Services Vendor Budget Instructions and Sample Budget Worksheet

Note: An Excel version of the budget worksheet is available as a separate document, and will be sent to all continuing applicants with your confirmation letter following review of your Letter of Intent. If you need another copy sent to you, contact Randi Lachter at QUITPLANServices@clearwaymn.org

BUDGET SECTION DESCRIPTIONS: 

<table>
<thead>
<tr>
<th>Section Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 1: Web Portal and Database</td>
<td>p. 51</td>
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<tr>
<td>Part 2: NRT</td>
<td>p. 52</td>
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<tr>
<td>Part 3: Email and text messaging</td>
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<tr>
<td>Part 4: Additional Expertise</td>
<td>p. 53</td>
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<td>Part 5: QUITPLAN® Services by Phone</td>
<td>p. 53</td>
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<tr>
<td>Part 6: QUITPLAN® Helpline</td>
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<td>Part 7: Printed Materials</td>
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<td>Part 8: Transition Budget</td>
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<tr>
<td>Part 9: Other Costs</td>
<td>p. 54</td>
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<tr>
<td>Additional Budget Information</td>
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</table>

Budget Instructions

Use the budget worksheet template to present the costs for the services requested in the scope of work. Provide a budget narrative describing how you arrived at each subtotal.

The bulleted items within each section of the budget instructions (below) are intended as examples of what should be included in your cost estimates for each area of work. They are NOT intended to limit what can be included, nor are you required to have a line item for each bullet.

- Use only those lines necessary, or add line items as needed to adequately detail and document the project budget.
- When completing the budget worksheet, please verify that all formulas are in place and correct.
- Do not enter anything in the cells containing “0” (zero).
- Do not enter anything in shaded cells containing formulas unless the subtotal for a budget line item cannot be calculated by multiplying # units by the price/unit. In this case, enter the cost for the estimated line item in the appropriate Subtotal cell to override the formula.
- Number of units based on the utilization assumptions have been locked and cannot be changed.

Budget Part 1: (quitplan.com Web Portal and QUITPLAN® Services Database): In the Subtotal column, provide the costs for all development, operations and maintenance related to online NRT application and registration for all QUITPLAN Service offerings as
described in the scope of work. Include costs associated with development and maintenance of the QUITPLAN Services database(s). Make sure to include in your budget the following items, if applicable:

- Development costs;
- Database management;
- Translation costs (Spanish);
- Customization and co-branding costs;
- Provision of real-time technical assistance during the Vendor’s operating hours to users trying to register for services;
- Anti-fraud measures/tracking & surveillance;
- Reporting costs; and
- Costs for any content you have proposed to make available on the quitplan.com web portal.

**Budget Part 2: (NRT):** Provide the costs per unit for fulfillment of NRT requests via NRT starter kits (2-week supplies) and via the QUITPLAN Helpline (8 weeks for Medicaid enrollees, 4 weeks for all other callers). Total costs will be calculated automatically by the formula. Make sure to include in your budget the following items, if applicable:

- Costs for patches, gum and lozenge
- Follow-up calls to all recipients of NRT starter kits (Note: the same call should not be billed as both an NRT follow-up call and a Helpline intake call).
  - Starter-kit follow-up calls reached
  - Starter-kit follow-up calls unreachable
- Inserting NRT instructions and possible additional materials with NRT mailings (do not include the cost of printing materials; all printing costs associated with materials should be included in Budget Part 7 “Printed Materials”)
- Mailing costs
- Anti-fraud measures/tracking & surveillance
- Reporting costs

**Budget Part 3 (Email and text messaging):** Provide the price per user or flat rate for each standalone service. It is assumed that any costs for email or text messaging included as part of the QUITPLAN Helpline program are covered in Budget Part 6 (QUITPLAN Helpline). In the subtotal column, provide the costs for each line item based on the estimated number of registrants. Make sure to include in your budget the following items, if applicable:

- Development costs
- Co-branding and customization costs
• Incorporation of ClearWay Minnesota-supplied content (estimated once per month for both email and text messaging)
• Tracking & surveillance
• Reporting costs

Budget Part 4 (Additional expertise): Provide an hourly rate for consulting (total costs will be calculated automatically by the formula) in the following areas:
• Online interactions and coaching by coaching staff (est. 5-7 hrs per week)
• Cessation-related consultation from clinical, operational, or programmatic staff. May include coaches, medical director, evaluation/research team or other personnel (est. 10 hours per month)

Budget Part 5 (QUITPLAN® Services by phone): Provide the costs for each type of call to QUITPLAN Services excluding QUITPLAN Helpline counseling-related calls (total costs will be calculated automatically by the formula). Provide costs for completed calls only. Types of calls for this section include, but are not limited to:

• General inquiry calls (information only provided; no services selected)
• Materials only calls (QUITPLAN Quitting Guide requested and ordered)
  o Do not include mailing costs for Quitting Guides in Budget Part 5. All mailing costs should be included in Budget Part 7 (printed materials).
• Registration for QUITPLAN Services (standalone email and/or text-messaging) – (NO Helpline)
• Proactive re-engagement of former QUITPLAN Services users
  ▪ Proactive re-engagement calls reached
  ▪ Proactive re-engagement calls unreachable
• Warm-transfer of health plan members to the appropriate quitline
• NRT starter kit ordering calls

Note: ClearWay Minnesota will not pay for calls such as out-of-state calls, prank calls, wrong numbers, hang-ups or calls that go to voicemail.

Budget Part 6 (QUITPLAN® Helpline): Provide the costs for completed calls for each type of counseling service/protocol provided (total costs will be calculated automatically by the formula). For counseling calls 1 and 2-5, all prices listed must be for received/completed interventions and must not include those callers who enroll or schedule a call but do not participate in an "intervention". Payment will only be provided for each call after it has actually been completed. “Completed” means a counseling/coaching interaction has taken place between a tobacco user and a counselor by phone. Include in your budget the following items, if applicable:
• Intake calls for QUITPLAN Helpline (registration)
• Counseling call one
- Counseling calls 2-5
- Receipt and processing of fax referrals via the Call it Quits Referral Program\(^5\)
  - Fax referrals reached/enrolled
  - Fax referrals unreachable/declined
  - Feedback to providers (per referral)
  - Monthly data extracts to the Call it Quits central database\(^6\)
- Anti-fraud measures/tracking & surveillance
- Reporting costs
- Note: costs associated with mailing materials to those registering for the QUITPLAN Helpline are to be included in the pricing structure for the Helpline calls and should not be included in Budget Part 7 Printed Materials.

**Budget Part 7 (Printed Materials):** Provide the costs for each type of printed material proposed, including Quitting Guides, fliers/posters, etc. (total costs for the Quitting Guide will be calculated automatically by the formula). Make sure to include in your budget the following items, if applicable:
- Development of content
- Customization and co-branding of materials
- Translation of materials into Spanish
- Mailing costs
- Creation of PDF or interactive online versions of all materials
- Revising and updating materials
- Note: costs associated with mailing materials to those registering for the QUITPLAN Helpline are to be included in the pricing structure for the Helpline calls and should not be included here.

**Budget Part 8 (Transition Budget):** In the Subtotal column, provide a cost estimate for any transition costs not described or included in any other section of the budget worksheet.

**Budget Part 9 (Other Costs):** Please itemize.

---

\(^5\) The Call it Quits Referral Program is a state-wide collaboration between six of Minnesota’s major health plans who provide quitline services (Blue Cross and Blue Shield of Minnesota, HealthPartners, Medica, Metropolitan Health Plan, PreferredOne and UCare,) and ClearWay Minnesota (providing quitline services for the uninsured and underinsured). The program enables health care providers to use a single form and fax number to refer patients who use tobacco to Minnesota’s quitlines. All Minnesota residents — whether covered by a health plan or not — have access to free support to quit. The goal of this collaboration is to make it easier for providers to connect their patients to appropriate tobacco quitline services.

\(^6\) After making attempts to reach tobacco users referred via the Call it Quits referral program, the QUITPLAN Services Vendor is required to fax results to the referring clinics (e.g., enrolled in the program, declined services, or unable to reach). In addition, results for all referrals must be submitted monthly to a central database as a data extract via secure FTP site.
ADDITIONAL BUDGET INFORMATION
In addition to the costs provided on the budget worksheet, include in your budget narrative the following information:

- Your hourly rate or other cost structure for providing customized reporting (it is assumed that the weekly, monthly, and quarterly reports, as well as all data transfers for evaluation and research purposes as described in the RFP, are included in the cost of doing business for each type of program provided);
- Hourly rate for IT programming beyond the development phase should future changes be needed;
- Account management fees, if applicable; and
- Other, as needed.
Budget Worksheet

(SAMPLE ONLY – Excel version available at www.clearwaymn.org/QUITPLAN-SERVICES-VENDOR-RFP)

Note: Use only those lines necessary, or add line items as needed to adequately detail and document the project budget. Do not enter anything in cells containing "0" (zero). Number of units based on the utilization assumptions have been locked and cannot be changed. Do not enter anything in shaded cells unless the subtotal for a budget line item cannot be calculated by multiplying # units by the price/unit. In this case, enter the cost for the estimated line item in the appropriate Subtotal cell to override the formula. Verify that all formulas are in place and correct.

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Subtotal - Web portal

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<td>Gum, 2 wks (starter kit)</td>
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<td>Lozenge, 2 wks (starter kit)</td>
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<tr>
<td>Patches, 4 wks (Helpline)</td>
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<tr>
<td>Gum, 4 wks (Helpline)</td>
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<td>Lozenge, 4 weeks (Helpline)</td>
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<td>Patches, 8 wks (Medicaid)</td>
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Subtotal - NRT

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<td>Text (number of registrants)</td>
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Subtotal - Email and text messaging

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NRT Decision Rules

Overall Guiding Principle
The QUITPLAN Helpline and the NRT starter kits are viewed as two distinct interventions with different audiences and purposes as described in the table below.

Overall Limits per 12-Month Period per Minnesotan
- Minnesotans may receive NRT starter kits or NRT through the Helpline in any order.⁷
- All Minnesotans are eligible for two two-week NRT starter kits in a year.
- Minnesotans who are eligible for the QUITPLAN Helpline (uninsured and underinsured) are also eligible for two four-week shipments of NRT per twelve-month period as part of their Helpline enrollment. Minnesota Medicaid enrollees are eligible for two eight-week shipments of NRT per twelve-month period as part of their Helpline enrollment.

<table>
<thead>
<tr>
<th></th>
<th>Helpline NRT</th>
<th>NRT Starter Kit</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Audience</strong></td>
<td>Ready to quit within 30 days</td>
<td>Any stage of readiness</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>Supports and enhances the telephone counseling program supervised by a Quit Coach</td>
<td>Opens the door to a possible, self-guided quit attempt. Supports those wanting to give NRT or quitting a try. Might move tobacco users towards a future quit attempt.</td>
</tr>
<tr>
<td><strong>Ordering process</strong></td>
<td>Helpline Coaches</td>
<td>Individual tobacco users via web portal or Helpline coaches via phone</td>
</tr>
<tr>
<td><strong>Quantity per registration</strong></td>
<td>4 weeks</td>
<td>2 weeks</td>
</tr>
<tr>
<td><strong>Frequency</strong></td>
<td>2 enrollments per year</td>
<td>2 times per year</td>
</tr>
</tbody>
</table>
| **Eligibility rules** | • Live or work in Minnesota  
• Uninsured or underinsured  
• At least 18 years old  
• Must enroll in Helpline to receive  
• Must pass medical screen or receive health provider approval to use NRT | • Live or work in Minnesota  
• At least 18 years old  
• Must complete/pass brief online medical screening for NRT  
• Provide address for NRT mailing  
• Must agree to a call from a Helpline coach and provide phone number |
| **Types**           | Patches, gum, lozenge (all flavors and mg.)                                  | Start with patches, one flavor of gum and one flavor lozenge⁸ – all mgs available |

⁷ Implementation of rules will be worked out in collaboration with the QUITPLAN Services Vendor as it is difficult to identify all scenarios at this phase.
Upon completion\(^9\) of QPHL counseling program, can reenroll at least 3 months apart.

<table>
<thead>
<tr>
<th>Shipment spacing/intervals</th>
<th>Vendor</th>
<th>Vendor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upon completion of QPHL counseling program, can reenroll</td>
<td>QUITPLAN Services Vendor</td>
<td>QUITPLAN Services Vendor</td>
</tr>
</tbody>
</table>

**Possible Combinations with Proposed Limits Per Year (2 four-week Helpline NRT and 2 NRT starter kits)**

<table>
<thead>
<tr>
<th>Helpline NRT (4 weeks)</th>
<th>NRT Starter Kits (2 weeks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>4 weeks</td>
</tr>
<tr>
<td>2</td>
<td>8 weeks</td>
</tr>
</tbody>
</table>

**Possible Combinations with Proposed Limits Per Year for Minnesota Medicaid Enrollees (2 eight-week Helpline NRT and 2 NRT starter kits)**

<table>
<thead>
<tr>
<th>Helpline NRT (8 weeks)</th>
<th>NRT Starter Kits (2 weeks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>8 weeks</td>
</tr>
<tr>
<td>2</td>
<td>16 weeks</td>
</tr>
</tbody>
</table>

\(^8\) Allowing all types of NRT permits greater consumer choice. Limiting to one flavor of gum and one flavor lozenge will hopefully simplify the ordering system and reduce confusion among consumers. ClearWay Minnesota will work with the QUITPLAN Services Vendor to determine the best options.

\(^9\) The selected Vendor and ClearWay Minnesota will work together to determine when an enrollment is considered complete.