**STATE OF MAINE REQUEST FOR PROPOSALS**

**RFP SUBMITTED QUESTIONS & ANSWERS SUMMARY**

|  |  |
| --- | --- |
| **RFP NUMBER AND TITLE:** | RFP 202506091 Community Health Nursing Maternal and Child Health Services |
| **RFP ISSUED BY:** | Department of Health and Human Services |
| **INFORMATIONAL MEETING LOCATION:** | *Informational session regarding this RFP was held via ZOOM*  |
| **INFORMATIONAL MEETING DATE/TIME:** | August 8, 2025, 10:00 AM  |
| **SUBMITTED QUESTIONS DUE DATE:** | August 12, 2025, no later than 11:59 p.m., local time |
| **QUESTION & ANSWER SUMMARY ISSUED:** | August 18, 2025 |
| **PROPOSAL DUE DATE:** | September 2, 2025, no later than 11:59 p.m., local time  |
| **PROPOSALS DUE TO:** | proposals@maine.gov  |
| **Unless specifically addressed below, all other provisions and clauses of the RFP remain unchanged.** |

**Provided below are questions asked at the Informational Meeting and the Department’s answers.**

|  |  |  |
| --- | --- | --- |
| **1** | **RFP Section & Page Number** | **Question** |
| Part I, A. Page 6. | There is mention of home visits needed in Districts 1 and 2 and **“possibly (District) 3.** How are we supposed to prepare a proposal for District 3?  |
| **Answer** |
| Per Part I, D. of the RFP, the Department anticipates making one (1) award. Bidders must submit a proposal for services in District 1 and 2, with the understanding there may possibly be a need for Home Visits in District 3, and at times additional coverage in other specific Districts throughout the State.  |

|  |  |  |
| --- | --- | --- |
| **2** | **RFP Section & Page Number** | **Question** |
| Part I, A. Page 6. | The RFP mentions there may be times the Department requires additional coverage in specific Districts throughout the State. How are we supposed to properly prepare a quote for that requirement? Where do we address that in our response; using subcontractor, staffing plan, budget, etc. |
| **Answer** |
| Refer to **Appendix G** of the RFP. The Cost Proposal is based on a Rate Per Home Visit for Primary Clients and a Rate Per Home Visit for Secondary Clients.  |

**Provided below are submitted written questions received and the Department’s answers**

|  |  |  |
| --- | --- | --- |
| **3** | **RFP Section & Page Number** | **Question** |
| Not Provided | It looks like the main territory it will cover are Districts 1,2 and 3. Is that correct? In other words, there is no need for contractors in the Bangor area?  |
| **Answer** |
| The Department does not anticipate District 6 needing contracted Home Visits since Maine CDC currently has sufficient coverage through its Public Health Nursing staff. |

|  |  |  |
| --- | --- | --- |
| **4** | **RFP Section & Page Number** | **Question** |
| Not Provided | Since these counties fall within District 7 and are not identified as priority areas under the current RFP, we are seeking clarification on the Department’s plans moving forward, particularly as they relate to the families we are actively serving. Specifically:1. Will current providers such as Downeast Community Partners (DCP) continue delivering services under the existing structure?
2. If MCH services through DCP are not expected to continue, is there a transition plan in place for the families currently enrolled?
 |
| **Answer** |
| 1. All current contracts for CHN MCH Services will expire on September 30, 2025. Thereafter, the Maine CDC will have sufficient coverage through its Public Health Nursing staff.
2. The Department will work with current providers to transition services as needed.
 |

|  |  |  |
| --- | --- | --- |
| **5** | **RFP Section & Page Number** | **Question** |
| Not Provided | Could you please confirm the number of live resumes required with the proposal submission? |
| **Answer** |
| The RFP does not require resumes.  |

|  |  |  |
| --- | --- | --- |
| **6** | **RFP Section & Page Number** | **Question** |
| Not provided | How many open positions are expected to be filled under this contract? |
| **Answer** |
| It is at the Bidder’s discretion to determine the need and ensure sufficient coverage based on approx. three thousand (3,000) Home Visits in District 1 and 2, and possibly 3, with the understanding there may be times where the Department requests additional coverage in other Districts throughout the State. |
| **7** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is a business license from the State of Maine required for the vendor to be eligible for award? |
| **Answer** |
| Bidders should seek legal counsel regarding any required business requirements for Maine. In addition, Bidder may refer to the State of Maine, [Business webpage](https://www.maine.gov/portal/business/). |

|  |  |  |
| --- | --- | --- |
| **8** | **RFP Section & Page Number** | **Question** |
| Not Provided | Should the required business license be submitted with the proposal or is it acceptable to provide it post-award? |
| **Answer** |
| Bidders should not provide additional attachments beyond those specified in the RFP. Additional materials not requested will not be considered part of the proposal and will not be evaluated.  |

|  |  |  |
| --- | --- | --- |
| **9** | **RFP Section & Page Number** | **Question** |
| Not Provided | Kindly confirm the primary place(s) of performance for the proposed services |
| **Answer** |
| Primary Districts for Home Visits will include District 1 and 2, and possibly 3, with the understanding there may be times where the Department requests additional coverage in other Districts throughout the State |

|  |  |  |
| --- | --- | --- |
| **10** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is this solicitation a recompete of an existing contract or a new requirement? |
| **Answer** |
| Historically, the Department has required contracts throughout different areas of the State to ensure sufficient Home Visits coverage. Overtime, the Department has been fortunate to receive Legislatively approved State lines for additional Public Health Nurses which allows Maine CDC to provide Home Visits through State staff.  |

|  |  |  |
| --- | --- | --- |
| **11** | **RFP Section & Page Number** | **Question** |
| Not Provided | Can you please share any available data on historical spend for this or a similar contract? |
| **Answer** |
| As this is a competitive process, the Department declines to answer.  |

|  |  |  |
| --- | --- | --- |
| **12** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is there an estimated total budget or expected spend for the duration of the contract? |
| **Answer** |
| As this is a competitive process, the Department declines to answer. |

|  |  |  |
| --- | --- | --- |
| **13** | **RFP Section & Page Number** | **Question** |
| Not Provided | Will the Department be providing equipment to the selected candidate? |
| **Answer** |
| No, it is the awarded Bidder’s responsibility to ensure staff have the necessary equipment to provide Home Visits as outlined in the RFP. |

|  |  |  |
| --- | --- | --- |
| **14** | **RFP Section & Page Number** | **Question** |
| Not Provided | Can a list be provided of equipment and, if any, software that needs to be provided from the vendor’s end? |
| **Answer** |
| No, it is the awarded Bidder’s responsibility to all registered nurses have appropriate and sufficient equipment available to provide Home Visits, refer to Part II, B. of the RFP. In addition, the awarded Bidder must ensure all reports and data collected are secure and confidentiality is maintained, refer to Part II, D. of the RFP.  |

|  |  |  |
| --- | --- | --- |
| **15** | **RFP Section & Page Number** | **Question** |
| Not Provided | Are resumes of key personnel required with the proposal submission? If yes, how many and for which roles? |
| **Answer** |
| No, Bidders are not to provide additional attachments beyond those specified in the RFP for the purpose of extending their response. Additional materials not requested will not be considered part of the proposal and will not be evaluated. |

|  |  |  |
| --- | --- | --- |
| **16** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is there a mandatory subcontracting goal associated with this contract? If yes, please specify the goal and percentage. |
| **Answer** |
| No. Bidders should identify in their proposal response whether or not subcontractors will be utilized. |

|  |  |  |
| --- | --- | --- |
| **17** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is there a preferred or approved list or link of eligible subcontractors? |
| **Answer** |
| No, it is at the Bidder’s discretion. |

|  |  |  |
| --- | --- | --- |
| **18** | **RFP Section & Page Number** | **Question** |
| Not Provided | Will this contract result in a single award or multiple awards? |
| **Answer** |
| Single award. |

|  |  |  |
| --- | --- | --- |
| **19** | **RFP Section & Page Number** | **Question** |
| Not Provided | Does this solicitation require only staffing services, or are additional professional services also expected? |
| **Answer** |
| Refer to Part II of the RFP.  |

|  |  |  |
| --- | --- | --- |
| **20** | **RFP Section & Page Number** | **Question** |
| Not Provided | 1. Is this RFP a reissue or recompete of a previous contract?
2. If so, could you share any details about the incumbent?
 |
| **Answer** |
| 1. Refer to the answer to question 10 of this document.
2. Current vendors include Andwell Health Partners, City of Bangor, and Downeast Community Partners.
 |

|  |  |  |
| --- | --- | --- |
| **21** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is a Certificate of Insurance required at the time of proposal submission, or only upon award? |
| **Answer** |
| Yes, upon proposal submission. |

|  |  |  |
| --- | --- | --- |
| **22** | **RFP Section & Page Number** | **Question** |
| Not Provided | Is Maine Home Health license required to bid? |
| **Answer** |
| No.  |
| **23** | **RFP Section & Page Number** | **Question** |
| Part II, A. Page 9 | Could you clarify the expected number of Registered Nurses (RNs) required under this RFP? |
| **Answer** |
| Refer to the answer to question 6 of this document.  |

|  |  |  |
| --- | --- | --- |
| **24** | **RFP Section & Page Number** | **Question** |
| Appendix GPage 33 | 1. Is there a current incumbent providing services under this contract?
2. If yes, what was the amount spent last year?
 |
| **Answer** |
| 1. Refer to the answer to question 20.b. of this document.
2. As this is a competitive process, the Department declines to answer.
 |

|  |  |  |
| --- | --- | --- |
| **25** | **RFP Section & Page Number** | **Question** |
| Appendix GPage 33 | Could you please provide the estimated budget for this opportunity? |
| **Answer** |
| As this is a competitive process, the Department declines to answer. |

|  |  |  |
| --- | --- | --- |
| **26** | **RFP Section & Page Number** | **Question** |
| Appendix CPage 28 | Are references specifically related to Maternal and Child Health care required or would you accept other RN-related references? |
| **Answer** |
| References should reflect experience and expertise within the scope of nursing, such as completing nurse physical assessments and screenings, health education, and clinical documentation that relates to Part II of the RFP.  |

|  |  |  |
| --- | --- | --- |
| **27** | **RFP Section & Page Number** | **Question** |
| Not Provided | Can you tell me why they removed the option to apply for the grant up in the Bangor area? |
| **Answer** |
| Refer to the answers to question 3 and 10 of this document.  |