



SUBJECT: Amendment No. 1 to Request for Proposal No. 3006  
DATE OF AMENDMENT: October 4, 2012  
DATE OF RFP RELEASE: September 21, 2012  
DATE AND TIME OF OPENING: November 1, 2012 @ 2:00 P.M.  
AGENCY CONTACT: Marcy Troesch, Procurement Staff Member

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The following shall be a part of RFP No. **3006** for ***Affordable Care Act Exchange Marketing and Outreach***. If a vendor has already returned a proposal and any of the information provided below changes that proposal, please submit the changes along with this amendment. You need not re-submit an entire proposal prior to the opening date and time.

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The following sections of RFP 3006 have been amended:

***Original Language***

3.4.4.14 Proposing vendors must provide a project schedule for each of the three (3) sections.

***Amended Language***

3.4.4.14 In order to be considered, proposing vendors must provide a project schedule for each of the three (3) sections. Submitted proposals that do not address all three phases of the project will be rejected.

***Original Language***

10.1 Proposals shall be consistently evaluated and scored in accordance with NRS 333.335(3) based upon the following criteria(:

***Amended Language***

10.1 Proposals will be reviewed at opening for compliance with RFP requirements. Submitted proposals found to be noncompliant will be rejected. Accepted Proposals shall be consistently evaluated and scored in accordance with NRS 333.335(3) based upon the following criteria(:

The following questions have been received and answered by the State of Nevada:

1. Is it acceptable for a proposing vendor to submit for individual phases, rather than all three?

***The submitting vendors must provide a proposal for all three phases of the RFP. Vendors are permitted to use subcontractors to meet the requirements of the RFP.***

2. If a proposing vendor chooses to submit for fewer than three phases, will the firm be penalized in any way?

***The RFP seeks responses to all three phases (see amended language, above. Submitted proposals that do not address solutions to all three phases of the RFP will be rejected.***

3. Can you please provide the name, project number and address that needs to be listed on the required insurance certificates?

***Although insurance requirements for RFP projects are in the RFP, the actual insurance certificates are not required to be submitted until after contract negotiations have begun. The information will be provided at that time.***

4. Given the SSHIX award to Xerox with involvement of KPMG and HPS as implementation partners for the design and build of the Exchange, what level of interaction and involvement will the awarded vendor for marketing/outreach under this contract have with implementation partners?

***Generally, the selected vendor will interact with Exchange staff. There may be some instances where the selected vendor will interact with Xerox (Xerox, KPMG, HPS), such as on graphic design on web portal pages, etc.***

5. Will an overarching project management office be established to manage interdependencies across all contracted vendors, including under this marketing contract? For example, how will potential interdependencies be managed for tasks such as web portal messaging included as part of this contract and web portal development under other contracts?

***The Silver State Health Insurance Exchange staff will serve as the overall project managers for all Exchange implementation activities. All communications related to web portal messaging will be directed to the Exchange's Communications Officer (Marketing and Outreach Project Manager). The Communications Officer will work directly with the Exchange's Chief Operations Officer (BOS Implementation Project Manager) to oversee the interdependencies between marketing and operations.***

6. Will Xerox be developing a demonstration site or any other demonstration videos that can be used for communications and marketing purposes?

***Yes, demonstration videos are currently in production.***

7. Is the name "Silver State Health Insurance Exchange" a finalized name for the Exchange or is a naming exercise to be included as part of the Branding task in 3.1.1.1 B 1 and B2 (page 9-10)?

***A naming exercise for the web portal is to be conducted as part of the branding task. The Exchange web portal and all references to the web portal will be by the new chosen***

***name. The new name or brand will be the public face of the Exchange. The Silver State Health Insurance Exchange will retain its name as the independent State agency that owns the brand name.***

8. Is the pricing of this proposal to include any legal fees incurred for Exchange name trademark checks and registrations?

***Yes, the cost proposal must include any legal fees incurred for Exchange name trademark checks and registrations.***

9. Task 3.2.1.1 B 2 requests descriptions of the qualified health plans available for enrollment to be included as part of the educational promotion. By what date will all the QHPs be identified and approved for inclusion in educational materials?

***This task requests the vendor provide a general description of Qualified Health Plans that will be available on the Exchange. The general outline of Essential Health Benefits that all QHPs offered on the Exchange must include will be available by March 2013. The changes to all health insurance policy offerings made by the Affordable Care Act are currently available. It was not a consideration of this RFP to educate the public on specific (Name Brand) QHPs offered on the Exchange as possibly hundreds of QHPs may be available on the Exchange.***

10. Is the cost for web domain purchase to be included as part of this contract?

***No.***

11. Will open enrollment run from October 2013 through March 2014 (3.3.1.1 C)?

***The first open enrollment for the Exchange will start on October 1, 2013 and will end on March 31, 2014.***

12. For the staffing plan referenced in Section 3.4.4.4, are specific resumes of key staff with additional representative staff resumes for anticipated support staff sufficient? Not all staff proposed may be held for contract award.

***Yes.***

13. Other state Exchanges have adopted the strategy of “no wrong door” – where all uninsured, regardless of income are encouraged to shop through the Exchange. Do you embrace this strategy or are you considering different approaches for subsidized/non-subsidized enrollees?

***The Exchange has adopted the “no wrong door” strategy and will accept all applications received and forward them (Medicaid, CHIP) to the correct agency for enrollment. This RFP will not market or advertise Medicaid or CHIP.***

14. Does the Exchange plan aim to be an “active purchaser” – i.e. setting standards for the minimum level of coverage that is available through the Exchange?

***The Exchange is a free market facilitator. The Exchange will market all plans from all carriers that meet both the state and federal guidelines for QHPs. The only limit imposed on plans is one licensed carrier may not market more than five (5) plans in any***

***metal tier. This would limit a licensed carrier to 25 plans on the individual Exchange and 25 plans on the SHOP Exchange.***

15. What are the biggest challenges you have had with other enrollment efforts? What have you learned from SCHIP efforts about barriers/challenges to enrollment?

***Other enrollment efforts are outside the scope of the Exchange project. Staff constantly reviews white papers, and interviews consultants, staff from other State of Nevada agencies, and staff from other states to better understand enrollment challenges.***

16. Section 1.1.1.4 How did you arrive at your stated metric of enrolling 145K in the first enrollee period?

***The enrollment goal of 145K was set with research by the State Demographer. It was derived by reducing the State's uninsured rate from 23.7% to 12% in the first year, assuming those newly insured are proportionately distributed among Medicaid, CHIP, the Exchange and private insurance.***

17. Section 3.1 Can you provide more detail about the type of research the Exchange has previously compiled?

***See section 3.4.4.7 of the RFP.***

18. Section 3.4.4.7 Do you have additional research – beyond the 2009 data included in a link – on the target audience demographics that we can review?

***No.***

19. Section 1.1.1.3 Does the Web Portal already exist or is it something the vendor would be expected to make recommendations on or develop?

***The software and operations side of the web portal exist. The vendor is expected to brand, create graphic designs, and market the web portal.***

20. Section 1.1.1.3 When will the website be live and ready to have advertising directed to it? Should we make assumptions based on the three phases?

***The web portal will go live October 1, 2013 for open enrollment. It is the Exchange's goal to have an informational section of the web portal or demo site up before that date.***

21. Section 1 Are there other race/ethnic populations in addition to Nevada's Native American population that should be given a similar level of prioritization?

***Spanish speaking residents of Nevada will also be prioritized.***

22. Section 3.2.1.1 Will there be a Spanish version of the Web Portal that paid media can direct Hispanic audiences to?

***Potentially. The design of the web portal has not been finalized. Currently, the initial web page on the web portal is provided in English. A language button on the web portal allows all of the web content to be translated to Spanish.***

23. Section 3.1.1.1 Will the logo need to have an English and Spanish version as well?

*Yes.*

24. Section 3.1.1.1 Are in-language materials expected? If yes, what is the prioritization of languages?

*English is the first priority, with Spanish as the second priority.*

25. Section 2 How many Navigators will be hired by the state of Nevada for this program? Where are you in the hiring process?

*It is not known how many Navigators will receive grant monies at this time. A draft version of the Navigator plan can be found at:*

*<http://exchange.nv.gov/uploadedFiles/exchangenvgov/Content/Meetings/08C-Navigators%20Producers%20and%20Outreach%20Specialists.pdf>*

26. Section 2 Can we see the Navigator job description?

*See answer to question 25.*

27. Section 2 How many Navigators will be hired across language proficiencies?

*See answer to question 25.*

28. Section 2 How do you plan to work with Navigators? Will this be a formal role?

*See answer to question 25.*

29. Section 2 To what extent are you looking for help/support identifying and recruiting Navigators as part of this RFP.

*This RFP does not address identifying and/or recruiting Navigators.*

30. Section 3.3.1.1 Please describe the function(s) of the walk-in centers and their geographic locations. Branding and Outreach.

*The final rule requires the availability of a walk-in center with reasonable accommodations for those with disabilities. The committee did not recommend the use of brick and mortar locations because of the cost. However, most navigators and brokers should be able to provide walk-in services. Certain state offices may also accommodate this rule.*

31. Section 3.1 Have you settled on the Silver State Health Insurance Exchange as the official name, or are you open to alternative names to brand the Exchange?

*See answer to question 7.*

32. Section 3.2.1.1 Is broker/dealer outreach a desired component of the campaign?

*No.*

33. Section 3.2.1.1 Can you give a high-level estimate of how many QHPs will be offered on the Exchange? Or can you provide us with a list of plans?

*Specific plan numbers will not be available until late summer 2013. Carriers are limited to 5 plans per metal tier.*

34. Section 3.2.1.1 What is the desired budget ratio of paid media vs. other campaign activities?

*The vendor must provide a budget to the Exchange and explain how their budget will best help the Exchange meet its goals.*

35. Section 3 Are there budget assumptions for each phase that we should adhere to?

*No.*

36. Section 4.4 – Are resumes required only for key personnel or are resumes required for all proposed individuals?

*Resumes are required for all personnel the vendor and/or subcontractor are going to assign to the project (if known at this time).*

37. Section 9.2.2.6 - Should we only include the Proposal Requirements identified in Section 3.4 in the Tab VI submission?

*Proposing vendors must include written responses in bold/italics immediately following the applicable RFP question, statement, and/or section. The State is seeking the written responses only; inclusion of the question or statement may provide clarification.*

38. Section 9.2.2.8 Should all responses be in bold/italics, including Vendor Staff Resumes?

*All responses should adhere to the requirements of the RFP. However, attachments such as example material and vendor staff resumes do not have to be in bold italics.*

39. Section 9.2.2.8 Is there a word or page limitation for each resume?

*No.*

40. Section 9.4.2.2 –Please confirm that Attachment I, Cost Schedule, is what is required under Tab II.

*The completed Attachment I, Cost Schedule, is expected to be submitted under Tab II of the Part II – Cost Proposal.*

41. Section 8 Will there be an in-person presentation associated with this RFP prior to award?

***The State will invite the top scoring proposers to make a presentation prior to the award of this RFP.***

42. Is information regarding the budget of this project available?

***Each proposing vendor must create a budget that will facilitate meeting the Exchange's goals in this RFP.***

43. Is the research mentioned in the Scope of Work, 3.1.1.1 A, available for interested vendors to review?

***See section 3.4.4.7 of the RFP.***

44. What is the proposed budget for this project?

***See answer to question 42.***

45. Where is the Silver State Health Insurance Exchange point-of-contact located?

***808 W. Nye Lane Ste. 204  
Carson City, Nevada 89703***

46. Will the Silver State Health Insurance Exchange provide staffing for public relation outreach activities?

***Yes.***

47. Page 8, how do vendors fill in the gaps in the body of research without conducting new research?

***The intent of this language is to minimize duplication of effort and cost. It is recognized that specific new targeted research will be required to fill in the gaps and complete test marketing of concepts. Section 3.1.1.1 A should read: Complete a target market study utilizing all the research that the Exchange previously compiled. New research may be required to fill in gaps in the previously compiled research.***

48. Beyond Native Americans are there any other special provisions to specific populations in ACA that we should be aware of?

***See question 21. Also see 45 CFR § 155.205.***

49. Phase 2 includes an evaluation, will the vendor be expected to also conduct an evaluation of Phase 3?

***No.***

50. Page 14 mentions vendors should provide samples of creative work. It seems that Tab IX of the Technical Proposal would be the proper place to insert hard copies of work samples.

Is this agreeable, or should they be kept separate? Does a separate “sample CD” also need to be provided if we are submitting hard copy samples in the written proposal, which will all go on the Master and Public Records CD?

***Any sample CDs submitted will be considered to be the same as hard copy samples and will not be required to be included on the Master and Public Records CDs.***

51. Page 17, mentions that some services may require licensing requirements. Are there any licensing requirements that vendors in pursuant of this contract should be aware of and obtain before the proposal submission?

***Section 4.1.4 assumes the vendor is aware of any licensing requirements the vendor’s profession may require.***

52. Is each subcontractor required to also provide 3 business references?

***Yes.***

53. On the business reference form, page 20, the first line asks for a “Reference #.” What does this refer to?

***Section 4.3.1 requests a minimum of three (3) references. There is only one (1) reference “form” included in section 4.3.1, but the information will need to be provided in the proposal for each reference included in this section. Proposing vendors will assign numbers to included references.***

54. Page 27, Tab IV, Letter F asks for copies of applicable certifications and/or licenses. What specific information needs to be included here? Additionally, Letter E asks for hardware and software maintenance agreements, what should we include here?

***See question 51 above and sections 4.1.3 and 4.1.4 of the RFP.***

55. Does the branding for the portal just include a home page or is it for the structure of the site itself?

***The branding of the web portal will include a name and an overall theme for the graphic areas of the web portal. The programming and structure of the portal is already complete.***

56. What agency created any present materials/website?

***The Silver State Health Insurance Exchange staff created all materials at [exchange.nv.gov](http://exchange.nv.gov)***

57. Does the Exchange currently have any marketing materials besides the website?

***No.***

58. What is the budget for this contract so that we can accurately estimate the cost proposal? Please specify media budget and labor budget.

*See answer to question 42.*

59. We have some questions on dates in the RFP that seem to be typos. Specifically, page 4, section 1, "Overview of Project," second paragraph: Shouldn't the beginning contract date be January 9, 2013, not 2012? Page 13, subsection C, "Urgency Message" subsection 1: Is March 31, 2013, the correct deadline date to purchase coverage when the open enrollment does not even start until Oct. 1, 2013?

*The beginning contract date should be January 9, 2013. Individuals may purchase insurance coverage during the initial open enrollment from October 1, 2013 through March 31, 2014.*

60. Page 13, subsection 5, "Alternative Methods to Enroll Messaging," mentions "Navigators" as one of the alternatives. From researching the Exchange's website, one can infer that the term "Navigator" means a person or organization. Is this an accurate interpretation? If so, will such navigators be specially trained by the Exchange? Will they receive any incentive to serve as Navigators?

*a. Yes*

*b. Yes*

*c. Navigators will compete for grants*

61. Page 15, subsection 3.4.4.11: Are the face-to-face bimonthly meetings with the Exchange's staff to be held in Carson City?

*Yes.*

62. Page 15, subsection 3.4.4.11: Does the Exchange have a preferred method of, or venue for, videoconferencing for the other bimonthly meetings? For example, does the State of Nevada have offices in various locations with videoconferencing facilities that a vendor could use? Or would commercial videoconferencing services be preferable?

*Both options of video conference are available. The Exchange has its own video conference room. It will be the vendor's choice on video conference services to use. Any selection must be able to show the vendors' work clearly.*

63. Page 39, subsection 11.3.4.2 states that the presence of the project manager and representative(s) of any involved subcontractor will be required at up to six (6) Exchange Board meetings in the first term of the contract. Subsection 11.3.4.3 states a similar requirement for up to four (4) Exchange Board meetings in the second year of the engagement. Is it correct that these meetings would be in addition to the bimonthly face-to-face meetings with the Exchange's staff?

*Yes. However, the Exchange will work with the vendor to include both meetings on the same day, or on adjacent days whenever possible.*

64. In addition to the reports on the Exchange’s website and any knowledgeable experts that the vendor knows of, will the Exchange recommend/provide contacts with expertise on the Affordable Care Act per se, and more specifically its special provisions for Nevada’s Native American population?

**Yes.**

65. Page 16, subsection 3.4.4.14 notes that “the State may require a performance bond in the dollar amount of the entire contract minus the media buy line items.” When, and under what circumstances, would the State make the decision regarding a performance bond? Would the decision be made at the time of contract award? Or later? If a contractor has a good record of executing previous contracts with the State, would there be less likelihood of a performance bond requirement?

***The decision regarding the performance bond will be made at the time of contract negotiations. Financial stability and track record will be taken into account when making this decision.***

66. Can subcontractors appear on more than one proposal (to subcontract with more than one entity)?

**Yes.**

67. Is the RFP for both SHOP Exchange and the individual consumer market Exchange?

***Yes, the vendor should provide a comprehensive response that includes outreach to employers.***

68. Will this be the only RFP issued for Exchange Outreach?

***Yes, this is the only RFP for Affordable Care Act Exchange Marketing and Outreach. However, the Exchange expects to use individuals called “Outreach Specialists” to assist Exchange staff with or take the place of Exchange staff in giving presentations to various stakeholder groups. While this RFP (3006) for Affordable Care Act Exchange Marketing and Outreach has broad requirements of content creation and delivery, the responsibilities of the Outreach Specialist are narrow in scope and generally focus on in-person delivery of the Exchange message. The Exchange has not yet determined how it will identify these individuals and reserves the right to issue an RFP to select Outreach Specialists.***

69. Will this be the only SHOP-related RFP issued?

**Yes.**

70. There is no reference of public relations within the proposal. Will all public relations efforts be handled internally, or will this be required within this contract?

***Public relations are not a requirement of this contract.***

71. Under Deliverable 3.1.1.1 A you ask for a target market study utilizing all the research that the Exchange previously compiled. Can you describe what you do have already completed? Is it just the list mentioned in 3.4.4.7?

***See section 3.4.4.7 of the RFP.***

72. To clarify, under Deliverable 3.1.1.1 A you ask for a target market study utilizing all the research that the Exchange previously compiled without expending funds on new research. Do you mean that you do not want to spend funds on new primary research? To complete all of the tasks under 3.1.1.1 A1. through A9. there is a likelihood that new research might have to occur if you haven't already completed all of those research tasks. For example, on A9 - it implies message testing and concept testing, which can only occur further down the marketing communications development process. So, no new market research is allowed? Only the review, analysis and recommendations report from existing research?

***See answer to question 47.***

73. Under Branding of the Exchange, in RFP section 3.1.1.1 B1. we are assuming that branding of the exchange (including its consumer brand name, mark, etc.) will be based on research. We are assuming it is not your intent at this point to call the product that the consumers would consider, the Silver State Health Insurance Exchange as the primary brand?

***Your assumption is correct.***

74. Can you describe how the SSHIX Call Center will work and how it will be operated? What if we can provide that component of service as part of the outreach program in an effective and cost effective manner?

***The call center is part of the existing contract with Xerox State Healthcare LLC.***

75. Do we assume for the purposes of the RFP that Nevada will be expanding their Medicaid population to 138% of the Federal Poverty Level?

***No. The State has not made a decision regarding the expansion of Medicaid eligibility. Research and messaging will need to conform to this decision. It is expected this decision will be made by January.***

76. Will advances be awarded to begin the project?

***No, the contract will be paid on a percent complete basis.***

77. Is there an established rate for administrative reimbursement?

***This RFP is all inclusive. The cost schedule must reflect the total cost proposed.***

78. When will the list of the qualified health plans be available to the awarded vendor?

***See answer to question 9.***

79. When will the information on how the consumer purchases on the exchange be made available to the awarded vendor?

*See: <http://www.youtube.com/watch?v=2yanSTe-qzU&feature=youtu.be>*

80. Is “Silver State Health Insurance Exchange” the final name of the Exchange or does the creation of an “identity” include the creation of a new name?

*See answer to question 7.*

81. When will Nevada determine if the Medicaid program will be expanded?

*See answer to question 75.*

82. How were the enrollment goals and objectives chosen on page 5?

*See answer to question 16.*

83. Is there a further breakdown of the 145,000 target enrollees for the first year?

*12,300 Individual Enrollees (>400% FPL)  
102,800 Individual Enrollees (138%-400% FPL)  
26,400 Individual Enrollees (100%-138% FPL)  
3,500 SHOP Enrollees*

84. Is the research mentioned in 3.1.1.1.A what is available at [http://exchange.nv.gov/reports/market\\_research/](http://exchange.nv.gov/reports/market_research/) or are there additional reports?

*See section 3.4.4.7 of the RFP.*

85. Per 3.4.4.11.B., will subcontractors be required to attend bi-monthly meetings once their work is completed?

*No.*

86. Is there an opportunity to negotiate the \$4,500 ‘charge’ detailed in 3.4.4.13?

*If there is an exception taken to this language, this would be addressed in contract negotiations.*

87. Do subcontractors need to register with the State of Nevada, Secretary of State’s Office?

*Yes.*

88. Is there a page limit for the full proposal?

*No.*

89. Where the RFP references “written response(s) in bold/italics” is it either/or or both?

*The State requests the responses be in both bold and italics.*

90. Is there a budget range we should work within?

*See answer to question 42.*

91. Section 3.1.1.1 suggests that the vendor use the Exchange’s primary research for Phase 1; however, #9 of same section requires message testing. Can the State please explain how message testing is expected to be performed without primary research?

*See answer to question 47.*

92. Is the Contractor required to have its own Call Center or utilize the State’s Call Center?

*The advertising is for the Exchange’s call center run by Xerox State Healthcare LLC.*

93. Our firm very recently submitted an RFP response for Exchange-related work for the Silver State Exchange. As part of that process, three of our state-based clients were gracious enough to complete the required reference forms and submit the documents within your deadline. In an effort to not unduly burden state employees, would the Silver State Exchange accept these already submitted references for this project as well? All contact information for references would be included in the proposal submittal under 4.3 should the State, which we encourage, reach out to these individuals.

*Yes. Please contact the purchasing offer listed on the first page of the RFP to indicate your intent with regards to this request.*

94. We have a number of state-based clients who have indicated that they will very gladly discuss over the telephone the quality of our firm’s work. However, the completion of required reference forms presents an undue burden given the priorities and current state staffing levels. In the event that the State require additional references beyond those previously submitted (discussed in Question 93), would the State consider removing the requirement that each bidder’s references complete and submit a reference form?

*See answer to question 93. References are a requirement for all State projects; however, proposing vendors may take exception to any requirements in the RFP.*

**ALL ELSE REMAINS THE SAME FOR RFP 3006.**

Vendor shall sign and return this amendment with proposal submitted.

NAME OF VENDOR \_\_\_\_\_

AUTHORIZED  
SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

***RFP 3006 Amendment 1***

This document must be submitted in the “State Documents” section/tab of vendors’ technical proposal