

Request For Proposal (RFP) Award Summary

The following form is used to convey the information necessary to post results of the RFP process on the Department of Administrative Services (DAS) Procurement Portal. Posting of RFPs and results is required per Executive Order No. 3 issued by Governor Rell.

After RFP evaluation and when approval has been obtained to issue a contract(s), complete the appropriate form fields as follows:

1. **Date:** Enter the date the form is being completed.
2. **Date of Award:** Enter the date that approval was obtained for selection of awardee(s).
3. **RFP #:** Enter the DPH Log number of the RFP. It is unlikely you will know the resulting contract number and using the RFP number allows bidders to more easily locate results corresponding to their bid. Using the RFP number will also eliminate problems otherwise encountered when multiple contracts result from a single RFP.
4. **Contract Period:** Enter the start and end dates of the contract(s) that will result from the RFP.
5. **Funding:** Enter the full amount of funding that will be awarded by the referenced RFP. In the case of multiple contract awards the individual amounts will be listed as indicated in step number 8 below. This amount may vary slightly from the amount published by the award if it is determined that not all funding will be awarded.
6. **Description of Service:** List an abbreviated summary of the services for which the RFP was issued.
7. **Proposing Applicants:** List, one per line, all applicants that responded to the RFP. Additional lines can be added to the table as needed.
8. **This bid has been awarded to:** List, one per line, the contractor(s) awarded a contract as a result of the RFP. For RFPs that result in a single contract you will only list one contractor. Include the FEIN or SSN of the contractor and on the small lines to the right, list the dollar value of the award for each contract/contractor. The total of all amounts in this category must equal the amount listed in step 5 above.
9. **Payment Terms:** Indicate the payment terms that will be used for the contract, e.g., "Equal quarterly payment amounts upon submission and approval of required deliverables and reports". Note: enter whatever terms are appropriate, the example is for illustrative purposes only.

IMPORTANT

10. Forward the completed form, electronically if possible, to the Chris Stan at: Christopher.Stan@ct.gov for posting to the DAS Procurement Portal. A receipt will be forwarded to the RFP contact, once the document has been posted on the DAS web site.
11. Maintain a printed copy of the RFP Award Summary for your RFP file and submit a copy to CGMS with the contract request(s).



Date: 08/29/2023
Date of Award: 02/8/23 (effective date 8/1/23)
RFP #: 2024-0902
Contract Period: 08/01/2023 to 08/31/2026
Funding Level: \$620,000

Description of Service:

The contractor will implement a mobile medical dental Integration project, an innovative project to increase access and reduce barriers to oral health services and coronavirus disease (COVID-19) vaccination and testing in dental health professional shortage areas (Dental HPSA) by utilizing mobile dental vehicles (MDV). The selected HCO will 1) establish or expand a MDV program to provide oral health services, and COVID-19 vaccinations and testing in Dental HPSAs, 2) collaborate inter-professionally with medical and dental providers to develop systems and workflows to identify, serve, and refer at risk populations, 3) educate the target population on the importance and safety of preventive dental care and COVID-19 vaccination and testing, and 4) develop a Sustainability Plan to ensure the continuation of the project.

Proposing Applicant(s):

Generations Family Health Center
 Yale New Haven Hospital

This bid has been awarded to:

<u>FEIN/SSN</u>	<u>Name</u>	
22-3158253	Generations Family Health Center	\$620,000

Payment Terms:

Payments will be issued monthly based on expenditure reports approved by the Department of Public Health.