

UNIVERSITY OF CALIFORNIA HEALTH

REQUEST FOR PROPOSAL

**CONSULTING SERVICES
FOR UC HEALTH CANCER CONSORTIUM
CANCER SPACE**

RFP NUMBER: 19-101

DATE ISSUED: JUNE 28, 2019

DUE DATE: JULY 12, 2019 – 1:00 P.M. (Pacific Time)

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The Regents of the University of California on behalf of its UC Health is soliciting proposals from qualified professionals to provide consulting services with the following core objective:

To facilitate development of an initial set of high-level goals and strategies for UC Health to better serve the patients of California and compete more effectively as a system and/or regionally in the face of its primary competitive threats in the cancer space.

I. OVERVIEW OF UC HEALTH IN THE CANCER SPACE

Five of the nation's leading comprehensive cancer centers, have joined forces to form the University of California Cancer Consortium, part of UC Health. Each comprehensive cancer center treats all types of cancers in adults and children.

UC Davis Comprehensive Cancer Center

UC San Francisco Helen Diller Family Comprehensive Cancer Center

UCLA Jonsson Comprehensive Cancer Center

UC Irvine Chao Family Comprehensive Cancer Center

UC San Diego Moores Cancer Center

Individually, these comprehensive cancer centers are hubs of expertise and innovation, advancing the development of technology, protocols, and medicines that will become available to practitioners and patients around the world.

Combined, the UC Cancer Consortium administers more than a thousand clinical trials annually, connects more than tens of thousands of patients to the newest, most innovative therapies available, and works to accelerate the most promising therapies forward toward federal approval.

Collectively, the Consortium's cancer centers are the nation's top recipient of research grants from the National Institutes of Health (NIH) and of cancer research grants from the National Cancer Institute (NCI), as well as the largest university holder of U.S. biomedical patents.

Attached is a brief white paper that further describes the Consortium, and provides a brief overview of UC's individual cancer centers.

II. SCOPE OF WORK

The firm selected will furnish professional consulting services, including market and competitor analysis, trend assessment, and benchmarking against comparable institutions. The consultant will also conduct stakeholder interviews and surveys, and facilitate meetings among targeted medical center leadership to seek common ground on the objectives of collaboration. Importantly, the focus of the task here is to identify how and in what operational and clinical areas it is beneficial for our cancer centers to act collectively – either at the regional or state-wide level.

As further described below, at the end of the assignment, consultant will deliver to UC Health a written report detailing the following:

- (i) A market analysis (based primarily on synthesis of our medical centers' existing local analyses) focusing on (a) the key players in CA and their areas of strength and vulnerability; and (b) identifying the "green fields" – opportunities for expansion
- (ii) An assessment of UC Health, identifying primary areas of opportunity for our cancer centers to compete collectively and/or regionally
- (iii) Recommended goals and high-level strategies for how UC Health should engage in the market given the competitive landscape (e.g., the encroachment of City of Hope and MD Anderson)

Consultant will also deliver a presentation to UC Health leadership describing the key findings and recommendations within this report.

III. QUESTIONS TO BE ADDRESSED

A number of questions should be addressed by the selected Vendor, including – but not limited to – the following:

1. What are the ways for our Cancer Centers to relate to each other to more effectively deliver high-quality cancer care in an increasingly competitive environment?
2. Are there ways for our Cancer Centers to relate to other providers in the State that have not been traditionally pursued?
3. What are the most relevant trends in national, CA, and regional cancer care delivery and finance and what initiatives should our Cancer Centers undertake over the next five years to succeed in this changing environment?
4. How can we leverage our quality of cancer care and clinical trials statewide to serve more patients and reduce disparities in care?"
5. What new models of care delivery should the Cancer Centers adopt collectively to balance patient demands with operational efficiencies? E.g., how should our cancer centers act collectively to:

- a. Integrate patient care services and research activities across targeted disease types?
 - b. Succeed in the dynamic environment of changing payment models and ACOs
6. What are the research opportunities the Cancer Centers should pursue in concert with the other UCs – regionally or statewide?
 7. What new clinical and research regulatory/legal requirements from the state/federal governments should our Cancer Centers be aware of if we consider programmatic or organizational changes?
 8. What are the gating operational issues to evaluate before structuring a collaboration (e.g. funds flow design; movement of margin between sites; governance structure; brand use and development)
 9. What are the key clinical, research and quality standards that will be used to assess cancer services delivery and what metrics do we need to achieve in order to succeed? What targets must be met on volume, cost and quality indicators to assure our ability to maintain access to payors' and purchasers' demands and to engage sponsors, government funding agencies and donors?

IV. **EXPECTATIONS FOR SCOPE OF WORK AND DETAILED WORK PLAN**

The following outlines the detailed expectations and/or requirements for the services to be completed as part of any contract resulted from the award of this Request for Proposal:

- **Lead the analysis and interview process:** This project will be driven by consultant in close coordination with, and with logistical support from, UC Health / Cancer Center leadership and staff.
- **Review and Analyze Cancer Center Clinical Program's Utilization, Financial, and Market, Patient Satisfaction, and Patient Experience of Care Data:** Review our internal financial and utilization data, already- compiled market data, and survey data. (As part of the proposal, consultant should describe the internal materials desired from each Cancer Center.)
- **Develop an Overview of the Market and Cancer Center Perceived Strengths and Weaknesses:** After reviewing our internal analysis and augmenting it with additional information as necessary, present your initial findings and conclusions regarding market trends, our market position as a consortium, and your assessment of our strengths and weaknesses.
- **Conduct Interviews and Surveys with Cancer Center Stakeholders:** There are a number of stakeholders (some of whom will not be part of the Cancer Centers) that may have valuable information regarding our current market, internal operations, and strategic options. Sufficient time should be dedicated to this task. You may wish to utilize a survey tool to ascertain perceptions of issues and opportunities from a broader audience.

- Facilitate leadership discussion: After conducting the initial internal and external landscape assessments, facilitate a meeting among leadership (e.g., CEOs, CSOs and cancer center directors) to seek common ground on the near term objectives for collective action.
- Develop and Present Recommendations: Present initial analysis and strategic recommendations and incorporate feedback from the UC Health Leadership.
- Produce a final report. Based on feedback from UC Health Leadership, prepare a Final Report detailing your recommendations.

Respondents may modify the proposed approach for the engagement provided the suggested approach results in a more efficient assessment of the key issues and creates a consensus on solutions.

V. REQUIRED VENDOR EXPERIENCE AND/OR BACKGROUND

Successful applicant will demonstrate:

- A breadth of planning experience with highly ranked NCI designated cancer centers providing services in competitive markets
- Knowledge of the cancer center market and emerging trends
- Knowledge of California market conditions and constraints
- Novel approaches to cancer services program development and organization at other NCI designated centers
- Strong facilitation skills and demonstrated ability to manage projects within complex organizations
- Sophisticated presentation tools and documents

VI. VENDOR REFERENCES

Please include at least five (5) references where you have provided similar services for a client of similar size and complexity.

Please include the following information for each reference:

- Health System or Medical Center Name
- Size of Health System or Medical Center
- Contact and Position Held by Contact
- Contact Information (i.e., address, telephone number, and email address)
- Date Services Performed

VII. PROPOSED PROJECT TEAM

Please provide an organization chart, list of resources and resumes of individuals who may be participating in this project if awarded to your company, including their role and/or responsibilities related to the awarded engagement.

VIII. RESPONSE DUE DATE

Responses are due on July 12, 2019 at 1:00 p.m. (Pacific Time).

IX. GENERAL INSTRUCTIONS

- A. Failure to comply with the provisions outlined herein (General Instructions) will result in your proposal being non-qualified and rejected as non-responsive.
- B. Vendors are required to submit acknowledgment of RFP receipt and provide their intent to participate. All acknowledgments must be received by July 2, 2019 and should be submitted by email to Eimee Miura (emiura@mednet.ucla.edu).
- C. The respondent shall provide two (2) written copies and two (2) electronic copies (flash drive) of their response. One (1) written copy should be clearly marked as the "master copy".
- D. A cover letter should be included with response and should include a brief statement of respondent's strengths as a managed services provider. The cover letter should identify the representative of the company that is duly authorized to commit and respond on behalf of the company. This person must sign the cover letter.
- E. Responses should include a return of the original RFP with initials in the space provided (lower right hand corner of each page). Respondent's initials will acknowledge respondent's understanding and acceptance of the contents on that page.
- F. Response should be submitted in a sealed container, package, or envelope that will preserve contents until opened by an authorized UC Health representative. The RFP number should be clearly marked on the outside of the container, package, or envelope.
- G. Overnight express mail, messenger, or any other delivery method that will ensure on time delivery should be used to send responses. UC Health does not assume responsibility for late receipt (delivery) of responses or responses sent by the United States Postal Services.
- H. Responses made by email or facsimile will not be accepted.

I. Responses should be sent to:

Eimee Miura
Chief Procurement Officer, UC Health
c/o UCLA Health Procurement & Strategic Sourcing
10920 Wilshire Blvd., Suite 750
Los Angeles, CA 90024
Telephone Number: (310) 794-0144

J. Responses should be made in the same order as provided in the RFP. Additional information and/or documents may be attached at the end of the response. The RFP section and item numbers should be noted and referenced on any additional documents.

K. Deviations from the RFP expectations and requirements must be noted in respondent's response. Respondents should be aware that any deviations to the minimum expectations and/or requirements as outlined in this RFP may result in disqualification.

L. Questions should be submitted in writing by email to:

Eimee Miura (emiura@mednet.ucla.edu)

M. As appropriate, responses to questions will be made in writing to all potential respondents. UC Health does not assume responsibility for questions or responses received after the RFP question and response deadline that might prevent the respondent's ability to provide a response within the established deadline.

N. All questions should be submitted to the designated UC Health representative. UCLA Health does not assume any responsibility for questions submitted to or answered by an unauthorized UCLA Health representative.

O. Potential respondents may not make contact with any member of the UC Health and may only contact the authorized UC Health staff as outlined in this RFP.

Failure to comply with this requirement may result in the disqualification of the vendor in further participation of this RFP.

X. SCHEDULE OF EVENTS

Distribution of RFP http://purchasing.uclahealth.org/bidding-on-jobs	June 28, 2019
RFP Receipt Acknowledgment and Intent to Participate	July 2, 2019
RFP Due Date	July 12, 2019 – 1:00 p.m.
Selection and Award of RFP	July 19, 2019
Contract Negotiations Completed and Executed Agreement	July 30, 2019
Project Start Date	August 1, 2019

UC Health reserves the right to change and/or modify this schedule. All vendor participants will be notified of any changes.

XI. BASIS FOR AWARD/SELECTION CRITERIA

The following criteria will be used for vendor selection:

- Project approach
- Vendor Qualifications –previous, relevant experience with highly ranked academic medical centers providing comprehensive cancer services in development of novel strategic initiative development and models of care
- Previous experience with a wide range of academic delivery structures within the context of the California market that is applicable to the scope of work outlined
- Quality of materials
- Knowledge of California conditions and constraints
- References to support the capability to successfully address the issues
Excellent communication, facilitation and project management capabilities as demonstrated through the written proposal, references, and presentations

XII. CONTRACT PERIOD

UC Health anticipates that it will enter into an Agreement with Consultant for professional consulting services for a period of three (3) months. We anticipate a contract period beginning on or about August 1, 2019 and continuing through October 31, 2019.

NOTE – UC Health contemplates that this is the first phase of an engagement. After developing the objectives of a collaboration (and subject to consultant’s successful execution of the initial scope of work) the second phase would be to design the structure; operational requirements; and financial

models of agreed-upon initiatives. UC Health reserves the right to extend the awarded agreement to cover any future phases resulting from the outcomes of the original engagement or to competitively bid any additional work. Any additional phases with contracted vendor would be subject to negotiation and execution of a separate scope of work and shall be made part of the original agreement and its terms and conditions.

XIII. GENERAL TERMS AND CONDITIONS

- A. Preparation Costs: UC Health is not responsible for any preparation costs incurred by respondent. Respondent is solely responsible for all costs in association with information, proposals, visitations, demonstration, and personnel furnished to comply with this RFP or any subsequent requests prior to issuance of an agreement.
- B. Cancellation of this RFP and/or Awarded Vendor Agreement: UCLA Health reserves the right to cancel any RFP or vendor award or any parts of any resulting contract when: (a) it is found that product quality, service or delivery is not in keeping with the provisions of this RFP and the awarded vendor(s) has not cured the deficiencies within five (5) days of written or verbal notification, or (b) an item or items or service(s) are no longer needed. Cancellation notification under this provision shall be given to the awarded vendor(s) in writing no later than thirty (30) days prior to the date the cancellation is effective. UC Health reserves the right to cancel with 30-day notice for cause or changing market conditions, or changing UC Health department(s) requirements, or changing requirements and/or savings identified through UC Health Value Analysis process, or identification of new technology/products, or due to mergers and/or affiliations of UC Health. (c) The product or service may be obtained through group purchasing activities with other institutions or firms. (d) The cancellation of the RFP or vendor award is determined to be in the best interest of University of California Health Systems.
- C. Unless otherwise stated herein or in any resulting master agreement, any applicable University of California Terms and Conditions (copy attached) shall be made a part of any agreement arising from the award of this RFP.
- D. The awarded vendor shall be required to use The University of California Master Services Agreement for any work or services provided as the result of this RFP. Sample template below.

E. Exceptions and Areas of Non-Compliance

Please indicate your compliance with the terms and conditions as set forth in this RFP.

100% Compliance – All terms and conditions of the RFP are accepted without any exceptions, limitations and/or exclusions.

Concession Requests – Acceptance with non-contingent concessions requested.

Non-Compliance – Acceptance contingent upon exceptions, limitations, and/or exclusions

Company

Signature

Date

Name

Title

- a. All exceptions, limitations and/or exclusions should be provided as an exhibit to the response and should include but not limited to the following information:
 - RFP section number and description/requirement
 - Details regarding exception, limitation and/or exclusion
 - Suggested alternative, if applicable

- b. UC Health reserves the right to review all exceptions, limitations and/or exclusions to determine its appropriateness to the scope of services as outlined in this RFP and may determine as the result of its review to disqualify a respondent from further consideration.