



RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

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REQUEST FOR PROPOSALS FOR San Francisco Health Service System

Healthy Aging Programs and Applications for SFHSS Retiree

Members

RFPQSFHSS2022.W6

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This Addendum is being issued in response to requestions regarding the above-referenced Request for Information (RFI).

Please review the terms of the RFI and this Addendum carefully. If there are any inconsistencies between the RFI and the terms of this Addendum, then the terms of this Addendum shall prevail.

RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

Questions & Answers

1. Is it acceptable for a Program to offer one or more Focus Areas and/or Topics of Interest (RFI Sec.III.D) entirely virtually? If so, which area(s) could be considered eligible for virtual-only delivery? For example, would it be acceptable for a vendor's existing programming on increasing social connectedness or improving sleep to remain virtual?

SFHSS Response:

As of January 1, 2022, the SFHSS Member population includes approximately 35,000 retirees, primarily aged 55 years and older (RFI Sec.II). While a large share of this population may have access to the internet and possess a meaningful level of digital literacy, SFHSS continues striving to provide its Members with equitable access to benefits and resources they are eligible for, including those who may not have modes to enroll electronically and/or participate in the Program virtually.

To this end, SFHSS is open to vendors' evidence-based recommendations on which focus areas and topics could be effectively delivered in-person and/or virtually in service of the Department's intent and goal for this Program (RFI Sec.I.A and Sec.III.C.v.). Additionally, SFHSS is open to delivery models where the vendor would be willing to supply the needed technology to Program participants who do not have devices in order to join a virtual portion of one or more trainings.

2. If a vendor is offering the program in both in-person and virtual formats, is there an order of preference of in-person and virtual components?

SFHSS Response:

SFHSS continues to follow the City's latest guidance on COVID-19 in order to prevent exposure to and limit the spread of the virus. As such, the Department remains in adherence to the City's policy on maintaining safe and healthy worksites (https://sfdhr.org/sites/default/files/documents/COVID-19/Managing-COVID-19-in-the-Workplace.pdf).

RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

SFHSS prioritizes the safety of its Members and strongly recommends that any Program that involves in-person participation continue following CDC recommendations on best practices to protect oneself and others from spreading the virus (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html), particularly when rates of infection are on the rise. These factors may best inform when an in-person or virtual format is most suitable for the Program at that time. Otherwise, SFHSS does not favor one format over the other.

3. Are Tracks A and B (RFI Sec.III.C.i.) presented as a single sign up, or could an eligible Member voluntarily enroll in one Track and not the other?

SFHSS Response:

An eligible Member would have the choice to participate in either Track A or B based on their interest in additional topics such as caregiver well-being. Similarly, there would be no prerequisite to complete Track A in order to participate in Track B.

4. Could a vendor offer content for Tracks A and B in partnership with other organizations, or must they deliver the Program as the sole entity? Are there any advantages to partnering?

SFHSS Response:

SFHSS is open to vendor recommendations on how the Program and its components are structured, including how the vendor proposes to operate individually or partner with one or more providers (e.g. subcontracting, joint venture, etc.). For any prospective Request for Proposal (RFP) related to this RFI, any vendors and their partners or subcontractors must comply with all City contracting requirements and the Minimum Qualifications established by SFHSS for that specific procurement opportunity.

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RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

5. Does a proposed Program need to be inclusive of all Focus Areas and Topics of Interest (RFI Sec.III.D)?

SFHSS Response:

SFHSS is open to vendors' evidence-based recommendations on the inclusion and sequencing of focus areas and topics in service of the Department's intent and goal for this Program (RFI Sec.I.A and Sec.III.C.v.).

6. Would a vendor be required to develop a deeper understanding of health plans offered to eligible Members (RFI Sec.III.F.) and interpret the information contained in the 2022 Retiree Benefits Guide? Is there already a SFHSS liaison in place to guide retirees through their health plan benefits?

SFHSS Response:

In partnership with our health plans, SFHSS would work closely with the vendor to ensure they have a full understanding of the types of benefits and offerings we would like to have the Program facilitators connect members to.

- 7. Please confirm the format specifications that coaching (RFI Sec.III.C.ii.) may be delivered, including the following:
 - a. Format: Individual, Group, or combination thereof.
 - b. <u>Engagement</u>: Personal contact, App-delivered messages, E-mails, or combination thereof
 - c. Participation: Opt-in / Opt-Out

SFHSS Response:

SFHSS understands "coaching" as a process that includes, but is not limited to, assisting an individual or group in creating goals, offering tools and resources to change a behavior, providing follow-up and problem-solving strategies, and making adjustments in order to sustain a new behavior. Despite the effectiveness of coaching, different individuals may have varying degrees of interest and/or readiness in engaging in this component.

RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

SFHSS is open to vendor recommendations on coaching models that are evidenced to be effective in supporting individuals and demographics of this Target Population (RFI Sec.II.) in achieving their goals over time. Likewise, the Department will consider evidence-based recommendations on the mode and manner of how coaching would be incorporated, including whether participation should be considered required or optional.

8. What kind of data will the vendor be required to demonstrate that the program is evidence-based and/or has an impact on senior health (RFI Sec.III.G)?

SFHSS Response:

There are various methods to determining a program as evidence-based, including the two primary definitions described by the federal Administration for Community Living under the US Department of Health and Human Services (https://acl.gov/programs/health-wellness/disease-prevention). SFHSS is also open to understanding how the vendor determined that their program model meets the spirit of these criteria as being evidence-based and efficacious for the Target Population.

9. Can programs be tailored to the 65+ population, or must they aim to serve retirees of all ages?

SFHSS Response:

As of January 1, 2022, the SFHSS Member population includes approximately 35,000 retirees, primarily aged 55 years and older (RFI Sec.II). The Program should be designed to also serve who SFHSS refers to as Early Retirees – those retirees who are not yet Medicare-eligible.

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RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

10. Please describe how the enrollment process would look like from SFHSS's perspective. Would there a sign-up system or software that SFHSS uses that the vendor would need to sync with? What are other technical considerations for enrollment?

SFHSS Response:

Ideally, an eligible individual interested in participating in the Program would be able to electronically enroll at that moment through the outreach tool or webpage presenting the Program information. If a vendor does not utilize a software or other internet-based platform to securely enroll and manage participants, SFHSS can use an existing online service (e.g., Eventbrite) to enroll Members into the Program. SFHSS is also open to vendors' recommendations on ways to implement and manage secure enrollment in the Program, including non-electronic (e.g. via mail, in-person, etc.) methods for eligible individuals who either may not have access to the internet or who prefer a non-electronic method.

11. Will participants in this Program be required to pay, or would this be free to retirees?

SFHSS Response:

Enrollment and participation in the Program will be available at no cost to eligible Members. Any associated costs will be covered by SFHSS.

12. Who is responsible for marketing the Program to SFHSS retirees? Who is responsible for enrolling them?

SFHSS Response:

SFHSS and the vendor would partner in marketing and enrolling the Target Population in the Program. For example, SFHSS would assist in direct email outreach to our retiree population in order gain interest and register participants. The vendor would provide customizable marketing templates and be responsible for direct home mailing.

RFI for Healthy Aging Programs and Applications for SFHSS Retiree Members

13. Is SFHSS participating in the DAS-led implementation of an Electronic Resource Directory (ERD), which will be based on the UniteUs platform?

SFHSS Response:

No. All information on benefits administered by SFHSS is posted on https://sfhss.org/.

14. Will SFHSS release an RFP in the future based on this RFI?

SFHSS Response:

SFHSS may consider releasing an RFP in the future on healthy aging and retiree well-being, and responses to this RFI may help to inform its development. A vendor's response or non-response to this RFI will not impact their ability to respond to a future RFP (Sec. IV.B.).