Roberta Wagner
Department of Administration
Purchasing Division
2019 Washington Street, East
Charleston, WV 25305-0130

Re: RFQ No.: EHP10067 TO PROVIDE TOBACCO CESSATION QUITLINE SERVICE TO A SPECIFIC POPULATION.

Dear Ms. Wagner,

Enclosed is beBetter Health's response to RFQ No, EHP10067 for provision of WV tobacco cessation services to the specific population of adults age 18-34. In the following quote we have provided all requested technical and Scope of Work information, as well as outlining our capabilities as evidenced by our organization's ten (10) year history of providing tobacco quitline services to the State of West Virginia with a 96.6% participant satisfaction rate.

Included with our RFQ response is a copy of the 2008 Annual Report of The West Virginia Tobacco Quitline Program. Pages 55 through 57 of this report describe the performance of beBetter Health in providing quitline services based on participant feedback. While participant feedback, quit rates and other data described in the Annual Report demonstrate our ability to deliver quality quitline services to West Virginia, it is difficult to convey in any written response the commitment and effort we put forth to provide the very best cessation experience possible for the participants of the West Virginia Tobacco Quitline.

In closing, we thank you for the opportunity to submit this quote and for the potential to be of service to the DTP and CDC in providing quitline services to West Virginia adults age 18-34 We look forward to an opportunity to discuss our ideas, experiences, and processes in more detail as appropriate.

Best regards,

Mike Wynn

**Tobacco Cessation Services** 

beBetter"

RECEIVED

2010 JAN 28 AM 11:59

While Paragram

#### Part 2 CONTRACTUAL SERVICES

#### 2.1 REQUIRED SERVICES

The vendor must be able to provide DTP and the CDC with specific data as it pertains to this population of WV adults who call the Quitline, enroll for Quitline services, quit using tobacco products and who stay quit after six and twelve months. The CDC also requires special financial reports and strongly suggests that all ARRA funds be placed in a special, separate account in state tobacco budgets to ensure accurate and timely financial and program/project reporting. The CDC also requires vendors to maintain separate accounting for these funds.

Consistent with data collection over the past 10 years for the West Virginia Tobacco Quitline, beBetter will be able to provide the specific data requested by DTP and the CDC pertaining to the population of WV adults ages 18-34 who call the Quitline, who enroll in Quitline services, quit using tobacco products, and the number who stay quit after six and twelve month intervals beBetter will be able to provide timely financial reports to DTP and the CDC and will maintain separate accounting and reporting from the rest of the West Virginia Tobacco Quitline

## A. Enrollment/Eligibility Verification

Vendor must, during the two year project period, enroll 600 18-34 year old West Virginian's for Quitline services which include 4 telephone counseling calls and educational materials. Vendor shall provide for member and registration eligibility authentication addressing DTP verification and benefit limits.

beBetter will enroll 600 18-34 year old West Virginian's for Quitline services over the two year project period.

### B. Screening for Readiness to Quit

Vendor shall provide screening of applicant's readiness to quit. The Quitline shall assist the caller to develop a personalized quit plan, provide comprehensive, proactive, phone based behavioral counseling to interested enrollees, linkage with available health plan coverage for tobacco dependence treatment, and/or referral to community based services, if desired and available. For those not ready to quit, vendor shall assure provision of appropriate motivational materials

beBetter Health screens all enrollee participants on their readiness to quit – both on readiness to quit and willingness to make lifestyle changes necessary to make their quit attempt a success. As the provider of the West Virginia Tobacco Quitline and others, beBetter has extensive experience in helping callers develop personalized quit plans – including strategies for dealing with potential obstacles, resistance, and ambivalence. beBetter Health can readily provide phone based behavioral counseling to interested enrollees, linkage with available health plan coverage for tobacco dependence treatment, and/or referral to community based services, if desired and available beBetter regularly participates in the WV Tobacco Coalition meetings and keeps an updated list of all available tobacco cessation resources in the state. For participants who are not ready to quit, they will be enrolled as an educational participant and will be shipped a packet of materials that will provide proactive suggestions for the participant to use in getting prepared to quit – for moving from the Contemplation and/or Preparation stage(s) to the Action stage.

#### C. Data and Reporting Requirements

1. A computerized tracking system to document Quitline activity shall be able to accurately tabulate discrete individuals, services provided, caller demographics and other characteristics including all referrals into and out of the system.

beBetter Health has a CRM computerized tracking system that can document Quitline activity and shall be able to accurately tabulate discrete individuals, services provided, caller demographics and other characteristics including all referrals into and out of the system. Evidence of our data tracking and reporting capabilities are demonstrated in the attached 2008 Annual Report.

2. The system shall be able to produce reports on the types and amounts of services provided per caller, call patterns by time of day, day of week and month

Utilizing our telephone call management system, beBetter Health is readily able to produce reports on the types and amounts of services provided per caller, call patterns by time of day, day of week and month. This information is incorporated into our staffing plans and projections to meet actual and anticipated surges in call volumes and/or other service parameters.

**3.** The Vendor shall collect data that measures the performance of the vendor in terms of waiting time for callers, volume of calls received during times when a live answer is not available, and abandonment rates.

Utilizing our telephone call management system, beBetter Health will collect data that measures its Tobacco Quitline performance in terms of waiting time for callers, volume of calls received during times when a live answer is not available, and abandonment rates. beBetter strives for excellence in customer service and ensuring professional responsiveness to caller needs and requests. Our commitment to this high level of customer service is evidenced by our 96 6% West Virginia Tobacco Quitline satisfaction rate measured post treatment (see 2008 Annual Report, page 55)

4. The Vendor shall send a monthly report attached to the monthly invoice to DTP staff and submit an electronic copy of the monthly report as well Quarterly reports and an Annual Summary of standardized reports that provide aggregate data by county shall also be submitted in the same manner

beBetter Health will send a monthly report attached to the monthly invoice to DTP staff and submit an electronic copy of the monthly report as well. Quarterly reports and an Annual Summary of standardized reports that provide aggregate data by county will also be submitted in the same manner. beBetter is currently providing this data as demonstrated in the 2008 Annual Report (see 2008 Annual Report, pages 7, 15-16, 27-35, 67-71)

#### D. Call Data and Database

Vendor shall be required to provide transparent access to all Quitline data to DTP, meaning the vendor will provide an easily accessible portal to vendor database for inquiry purposes. Vendor shall be required to capture (at minimum) the following data and have a readily accessible reporting database for reporting required data elements for monthly reports to include current month and contract year-to-date for the following:

1. Total incoming calls

- 2. Live response rate
- 3. Average speed of answer
- 4. Messages left
- 5. Number of callers registered for services by type of caller (tobacco user, proxy, and provider)
- 6. First time callers vs. repeat callers
- 7. Other calls (calls not resulting in enrollee, general public/info, prank, wrong number, etc.)
- 8. Tobacco users stage of readiness to quit
- 9. Tobacco user by types of tobacco
- 10. Pregnancy status (pregnant, breastfeeding, planning pregnancy)
- 11. Tobacco users enrolled by city and county
- 12. Tobacco users by race
- 13. Tobacco users by ethnicity
- 14. Tobacco users by gender
- **15**. Tobacco users by age
- 16. Tobacco users by education
- 17. Tobacco users by language
- 18. Enrollments by city and county
- 19. Caller type by city and county
- 20. "How heard about responses" by city and county
- 21. Was there a "special" media program cited as why the Quitline was called
- 22. Callers by health plan/insurance
- 23. Provider advice to quit
- 24. Smoking policy in home
- 25. Total services provided in current month
- **26.** Services provided to providers in current month
- 27. Services provided to proxy callers in current month
- 28. Services provided to members/enrollees during month, regardless of registration date
- 29. Collect e-mail addresses and cell phone numbers
- **30.** Develop and maintain an "emergency" call-in system where a tobacco user in trouble (after hours) can call a dedicated cell phone line and talk to a quitline counselor.

Utilizing internal information management systems beBetter will make available a portal for DTP and the CDC to access requested data beBetter, DTP and the CDC will meet to discuss the format and access of the portal.

## E. Support and Educational Materials

Vendor shall provide and distribute cessation materials that address self-help cessation techniques for tobacco users

Receiving the National Health Information Award in recognition of our Tobacco Solutions Magazine, beBetter is a provider of education resources—beBetter will provide and distribute educational materials to both enrollees and those not yet ready to quit that address self-help techniques for quitting and/or getting ready to quit

### F. Quitline Media Campaigns

DTP and/or the DHHR media vendor shall provide as much advance notice as possible to the vendor about Quitline campaigns and media events. A minimum of one to two weeks' notice shall be provided on all paid media campaign activities.

beBetter agrees that a minimum of two weeks' notice is adequate with regard to paid media campaign activities.

## G. Surveillance and Evaluation

The vendor shall provide six month and 12 month post surveys on a randomized sample of each month's enrollment population. To facilitate effective evaluation of the Quitline, the Vendor shall work collaboratively with the Division of Tobacco Prevention.

beBetter will provide six and 12 month post surveys on a randomized sample of each month's enrollment population in collaboration with DTP beBetter currently provides and continues to maintain a very in-depth annual evaluation of the West Virginia Tobacco Quitline. This evaluation produces an extensive Annual Report which is provided to the Quitline each year. (see 2008 Annual Report)

#### H. System Capability

Vendor should meet the following standards for the operation of the West Virginia Tobacco Quitline:

**1**. The vendor should assure core functionality to provide qualified personnel, facilities, and equipment necessary to provide a toll-free telephone service.

As the provider of services for the West Virginia Tobacco Quitline for the past ten (10) years, as well as other Tobacco Cessation programs, beBetter Health has demonstrated a commitment to quality and integrity of service(s) provided. beBetter Health has the operational functionality to offer a toll-free telephonic Tobacco Quitline to all fifty-five (55) counties of the State of West Virginia. beBetter's staff hiring and training process(es) ensure that all staff/personnel who provide services for the West Virginia Tobacco Quitline are knowledgeable and qualified prior to their going, "live" on the phones. Ongoing staff training and information sharing are integral parts of our quality assurance program. Our toll-free system platform design allows for West Virginia residents who may be outside of the State for work, vacations, military deployments, etc. to continue to access the Quitline for services via a seamless process.

2. The system should be able to handle multiple simultaneous incoming and out-going calls. Automated answering systems may only be used when Quitline personnel are unavailable (after hours, all personnel busy with other calls). Systems should offer a strong, scalable communications server, automatic call distribution functionality, real time monitoring of overall activity as well as individual calls, collection, analysis and reporting of data, and telephonic integration allowing information exchange between voice and data systems.

The telephone system currently in use offers a strong, scalable communications server, automatic call distribution functionality, real time monitoring of overall activity as well as individual calls, collection, analysis and reporting of data. This system capability allows for rapid adjustments in resources to meet incoming and/or outgoing call needs and/or requirements beBetter has a defined process for following up on voice mails left after hours and/or on holidays where the Quitline is closed and/or the rare instances when no staff are available, that includes a staff log along with documentation of attempts at follow-up.

**3.**Office space should accommodate administrative, Counseling and support staff, and confidential records as well as sufficient telephone lines, telephone and computer hardware. A TDD line should be available to the hearing impaired

beBetter Health currently operates its Call Center out of 109 Capitol Street, Charleston, West Virginia. Administrative staff and support staff are located in the same building. The hours of operation at present are 8:00 a.m. to 9:00 p.m. Monday through Friday and 8:00 a.m. to 5:00 p.m. on Saturdays and Sundays with a plan to expand to 8:00 a.m. to 10:00 p.m. seven (7) days a week by May 1, 2010. The Call Center is closed on July 4<sup>th</sup>, Thanksgiving Day, and Christmas Day with reduced hours on Christmas Eve. beBetter Health has TTY/TDD capability for both incoming and outgoing calls. beBetter also has the capacity to conduct coaching via e-mail

#### I. Hours of Operation

1. The Vendor should assure a system infrastructure to provide *live* response for a minimum of 98 hours per weeks Recorded information and callback capacity is required for the remaining 72 hours of the week

beBetter plans to expand hours of call center operation to 8:00 a.m. to 10:00 p.m seven (7) days a week by May 1, 2010, which will allow for a total of 98 hours a week of live response time. The recorded information and callback capacity currently in place will of course be adjusted according to these new hours of operation at that time

2. At a minimum, during the two (2) year project period the vendor should offer live hours of operation from Monday to Sunday 8:00 a.m. to 10:00 p.m. All times listed as Eastern Time.

beBetter Health currently operates its Call Center out of 109 Capitol Street, Charleston, West Virginia. The hours of operation at present are 8:00 a.m. to 9:00 p.m. Monday through Friday and 8:00 a.m. to 5:00 p.m. on Saturday and Sunday with a plan to expand to 8:00 a.m. to 10:00 p.m. seven (7) days a week by May 1, 2010.

**3.** Peak times for calls should be continuously monitored, and hours of live staffing should be modified accordingly to meet peak volume times. Volume should be assessed during live hours of coverage, hours outside of live coverage, and as needed in collaboration with media events.

The beBetter Health call center will continuously monitor peak times for calls – both inbound and outbound - and hours of live staffing will be modified accordingly to meet peak volume times. Volume will be assessed during live hours of coverage, hours outside of live coverage, and as needed in collaboration with media events.

4. Operation is not required on Independence Day, Thanksgiving Day, and Christmas Day, however coverage is expected for other holidays, especially New Year's Day. Early closure at 2:00 p.m. on Christmas Eve, and 5:00 p.m. on New Year's Eve is acceptable.

The Call Center is closed on July 4<sup>th</sup>, Thanksgiving Day, and Christmas Day with reduced operating hours on Christmas Eve and New Year's Eve. beBetter Health utilizes a voicemail procedure and log to capture intake and coaching calls that come in after hours. These calls are returned no later than the next business day Counseling and/or coaching appointments are scheduled at each juncture

starting with the participants being asked what is the best time to call at intake and/or in the referral process.

## J. Call Standards and Phone Center System Capacity, Expandability

Vendors should strive to achieve the following performance measures to assess the incoming call center capability.

1.90% of calls received during operating hours to the West Virginia Tobacco Quitline should receive a live response. The average live answer speed should be within 30 seconds. Less than 5% abandonment for calls waiting greater than 30 seconds – following the initial client queue message

beBetter Health's call center operations priority is to provide high quality service using data driven actions and decisions by cross functional teams. Live answer rate, live answer speed, and abandonment rates are typical metrics used by beBetter Health for current clients. beBetter Health currently manages call center operations to ensure that we meet or exceed our customer's expectations. beBetter's 2009 live answer rate with the WVTQL is 91.18%, with a live answer speed of less than 20 seconds. The abandonment rate for 2009 was 5.6%.

2.100% of self-help materials should be sent within one day of registration.

beBetter Health's fulfillment operation is designed to comply with the requirement of sending materials within one business day from the date of registration.

3.95% of voicemail messages should be initiated for return within one day.

beBetter Health's call center operation currently has a process in place to ensure and document the receipt and disposition of voicemails. Voicemails are checked at multiple designated times throughout the work day and recorded in the voicemail record. Actions are immediately taken to ensure the proper handling of voicemails. This process enables beBetter to meet the requirement as outlined above.

4.70 to 80% of callers interested in speaking with a Quitline Specialist should be transferred directly after completing registration. The remaining 20 to 30% should be contracted within the time frame that the participant requests

beBetter Health's call center operations currently performs this function as a standard procedure. The call center equipment and the personnel resources are planned in such a manner as to successfully meet this requirement.

#### K. Staffing

1. A staffing plan should be in place that provides a *live* call response for at least 98 hours per week, and provide for trained behavioral health specialists. Highly Desirable: Counselors with degrees in social or behavioral health fields with a minimum of two (2) years of counseling experience would be preferred. Highly desirable: Vendor should assure a ratio of at least one supervisor to every 10 to 15 counselors, and provide adequate orientation and ongoing training for all staff

beBetter Health operates its Call Center out of 109 Capitol Street, Charleston, West Virginia. The hours of operation are currently 8:00 a.m. to 9:00 p.m. Monday through Friday and 8:00 a.m. to 5:00 p.m. on Saturdays and Sundays with a plan to expand to 8:00 a.m. to 10:00 p.m. seven (7) days

a week by May 1, 2010 The Call Center is closed on July 4<sup>th</sup>, Thanksgiving Day, and Christmas Day with reduced operating hours on Christmas Eve and New Year's Eve. beBetter Health utilizes a voicemail procedure and log to capture intake and coaching calls that come in after hours. These calls are returned the next business day. Counseling and/or coaching appointments are scheduled at each juncture starting with the participants being asked what is the best time to call at intake and/or in the referral process

beBetter Health currently has a supervisor to coach ratio of 1:8. Our coaching supervisor requirement is a Master's Level Licensed Professional Counselor and a Certified Addictions Counselor Coaches are required to have, at a minimum, a Bachelor's Degree in a health related field and relevant experience, or be a Registered Nurse with an unrestricted license. Many have Master's Degrees and/or are licensed for independent practice

Sample brief resumes of some of our staff in the coaching department are listed below

Name: Thomas D. Miller, MA, LPC, CAC, IADC, Phone Coach/CSP Supervisor

**Credentials:** Licensed Professional Counselor – WV #1379; Certified Addictions Counselor – WV #93-113; West Virginia Major Adult Teaching Permit – Permanent; Internationally Certified Drug and Alcohol Counselor

**Education:** Bachelor of Science in Criminal Justice, Minor in Abnormal Psychology, from West Virginia State College (now West Virginia State University); Master of Arts in Counseling from the School of Education and Professional Studies at Marshall University Graduate College (formerly West Virginia Graduate College)

Years of Experience in the field and/or related work: 20 years

Specialized Training and/or Credentialing: CISM - Basic/Peer/Advanced/School based/T-the-T; EQ-I

Certified; MI/MRC Certified

Years working with the West Virginia Tobacco Quitline: 4 years

Name: Rebecca Snyder MA, MSW, Resource Counselor

Credentials: Licensed Social Worker

Education: West Virginia University: Masters of Public Administration and Masters of Social Work

May 2003, West Virginia Wesleyan College Bachelor of Arts, May 2000

Years of Experience in the field and/or related work: 9 years Years working with the West Virginia Tobacco Quitline: 6 years

Name: Steven C, Eshenaur, D.O., Medical Director

Credentials: Board Certified in Family Medicine, WV License #1796

**Education:** Family Medicine Residency, West Virginia University at Charleston Area Medical Center; Doctor of Osteopathy, West Virginia School of Osteopathic Medicine; Bachelor of Science in Biology,

Mount Vernon Nazarene University

Years of Experience in the field and/or related work: 11 years

Specialized Training and/or Credentials: Certified Medical Review Officer, ACLS, PALS, DEA#

6541608

Years working with the West Virginia Tobacco Quitline: 4 years

Name: Marlene R. Harrah, RN, ASN Credentials: WV RN License #66186

**Education:** Associate of Science in Nursing from the University of Charleston

Specialized Associate Degree in Medical Assisting and Office Technology from West Virginia

Junior College

Years of Experience in the field and/or related work: Nursing (4 years). Medical Office

Management (6 years) Coaching: Two (2) years

Specialized Training and/or Credentialing: BCLS, Medical Transcription.

Years working with the West Virginia Tobacco Quitline: 2 years

Name: Denise L. Minnear, MS, MSW, LCSW (NY), LGSW (WV)

Credentials: Licensed Social Worker

**Education:** Bachelor of Science in Physical Education; Minor in Psychology—Washington State University: Master of Science in Teaching, Adaptive Physical Education – Portland State University:

Master of Social Work, Clinical—State University of New York at Albany

**Years of Experience in the field and/or related work:** Teaching—15 yrs; Social Work—15 yrs Specialized Training and/or Credentialing: **American Association of Lifestyle Counselors- Wt**.

Management - 4 yrs

Years working with the West Virginia Tobacco Quitline: 4 years

2. The Department of Health and Human Services reserves the right to reject any staff proposed or later assigned to the project and require the successful vendor to remove them from the project. Whenever possible, the successful vendor shall notify the Department two (2) weeks prior to replacing any key staff. Vendor shall have a clinical and/or medical director who is available, as needed, to provide technical assistance and oversight.

beBetter Health understands the Department's right(s) to reject any staff proposed or later assigned to the project and require the successful vendor to remove them from the project beBetter will comply with all applicable state and federal labor laws. Further, beBetter will whenever possible, notify the Department two (2) weeks prior to replacing any key staff.

beBetter utilizes both a Clinical Director and a Medical Director for the operation of its Quitline Services. Brief resumes of those two (2) staff are included below.

Name: Thomas D. Miller, MA, LPC, CAC, IADC, Phone Coach/CSP Supervisor

**Credentials:** Licensed Professional Counselor – WV #1379; Certified Addictions Counselor – WV #93-113; West Virginia Major Adult Teaching Permit – Permanent; Internationally Certified Drug and Alcohol Counselor

**Education:** Bachelor of Science in Criminal Justice, Minor in Abnormal Psychology, from West Virginia State College (now West Virginia State University); Master of Arts in Counseling from the School of Education and Professional Studies at Marshall University Graduate College (formerly West Virginia Graduate College)

Years of Experience in the field and/or related work: 20 years

**Specialized Training and/or Credentialing**: CISM - Basic/Peer/Advanced/School based/T-the-T; EQ-I Certified; MI/MRC Certified

Name: Steven C, Eshenaur, D.O., Medical Director

Credentials: Board Certified in Family Medicine, WV License #1796

**Education:** Family Medicine Residency, West Virginia University at Charleston Area Medical Center; Doctor of Osteopathy, West Virginia School of Osteopathic Medicine; Bachelor of Science in Biology, Mount Vernon Nazarene University

Years of Experience in the field and/or related work: 11 years

Specialized Training and/or Credentials: Certified Medical Review Officer, ACLS, PALS, DEA#
6541608

3. Staff Training – All Quitline staff and phone coaches are to receive on-going training in order to maintain maximum understanding and comprehension of accepted industry standards. Training activities should include both internal and external training and educational resources. All phone center staff is to be extensively trained on contract specifications and changes, customer service, tobacco cessation, and core coaching competencies.

All new beBetter Health Tobacco Quitline staff are required to attend a new staff orientation that includes, but is not limited to: HIPAA training; OSHA Training; job specific topics such as tobacco use and dependence; the Transtheoretical Stages of Change Model; Motivational Interviewing; service contracts and Standards of Care; diversity training; and core elements of good customer service Further, phone coaches are required to participate in an ongoing training and certification program. Licensed and/or credentialed staff are encouraged to attend continuing educational trainings needed for licensure as well as for personal/professional development. The current training schedule for all beBetter's Health and Tobacco Coaches is outlined below.

Skill Set I-A:		
<ul> <li>Introduction to Coaching         <ul> <li>The Basics;</li> <li>Establishing Rapport</li> <li>Reflective Listening</li> <li>Providing Feedback</li> <li>Problem Resolution</li> </ul> </li> <li>Goal Setting and Managing         <ul> <li>Expectations</li> <li>Goal Setting/Managing</li> </ul> </li> </ul>	<ul> <li>Coaching vs. Counseling - Health and Wellness Coaching</li> <li>Core Competencies in Effective Coaching</li> <li>Motivating the Unmotivated</li> <li>Basic Conflict Management and Problem Resolution</li> </ul>	11/05/09 12/03/09 02/04/10 02/18/10
Expectations  Skill Set I-B  beBetter Coaching Model  Stages of Change  Introduction to Emotional	<ul> <li>The beBetter 6 Step Quality Coaching Model</li> <li>Introduction to the Stages of Change</li> <li>Introduction to Emotional Intelligence and Coaching</li> <li>Introduction to Motivational Interviewing</li> </ul>	03/20/10* 03/20/10* 04/15/10 05/20/10
Intelligence  Introduction to Motivational Interviewing		06/19/10* 06/19/10* 07/15/10 08/19/10 09/04/10*
Skill Set I-C  Introduction to Dependency and Addiction  Blending of MI, EI, and SOC	<ul> <li>Introduction to Tobacco Cessation and Coaching Tips</li> <li>NRT Overview</li> <li>Introduction to Weight Management</li> <li>Dealing with Stress and other Issues that Impact Coaching</li> <li>Developing SMART Goals</li> </ul>	09/04/10* 09/04/10* 10/07/10
Skill Set I-D  Documentation Requirements  Coaching Ethics  Customer Service	<ul> <li>Appropriate Documentation</li> <li>Ethics Review and Performance Expectations</li> <li>Professionalism in Delivering Excellent Customer Service</li> </ul>	

## **Case Presentations:**

### Cases will be presented on the following dates:

 11/19/09
 12/17/09
 03/04/10
 05/06/10

 07/01/10
 08/05/10
 10/21/10
 11/18/10

The coaches will rotate responsibility for presenting following the attached outline. The Iraining Coordinator will schedule the coaches and serve as facilitator for the sessions. These sessions will be held from 1:00 p.m. – 2:00 p.m. on the above dates with two to three case presentations each. They will be held in the 1<sup>st</sup> Floor Conference Room of the Charleston office with coaches working outside of Charleston participating via

### Other:

The following learning opportunities will be incorporate into the schedule:

- Shadowing other experienced coaches
- REMEDY and other II applications
- Introduction to Processing
- Role Playing
- Select articles and discussions
- Participation in monthly case presentations
- Shadowing with Masters Level Coach

conference call.

Each session will be from 1:00 - 2:00 p.m. with the exception of three Saturday 6 hour session indicated by the \* above(specific time to be determined).

11/01/2009 - 12/30/2010

As an augmentation to the beBetter Health Coaching training process, all of our coaches are required to participate in the beBetter Health Case Presentation Model where they have to present problematic and/or difficult cases to their peers for review and/or clinical guidance. This process is designed to give coaches and counselors the exposure to unique and/or diverse situations and to encourage the use of clinical guidance when confronted with difficult and/or problematic cases. The outline of the process is included below.

# **Case Presentation Model**

Coach:	Date:	
Type of Coaching Case (Check one):	Tobacco Wellness Weig	ht Management
Gender of Participant: M F	Age:	
What type of guidance are you looking for?		
Clinical Informational Other (Specify):		ninistrative Ethical
What stage of Change do you feel that Pre Contemplation Contemplation	the participant is in? (Check	
What is the situation you want to present?	(Include both subjective and o	bjective)
Questions for clarification from the team:  1. 2		
3		
PLAN:		
The Coach will:		

The participant will:

West Virginia Department of Health and Human Resources
Bureau for Public Health
Office of Community Health Systems and Health Promotion
Division of Tobacco Prevention EHP10067

## COST SHEET FOR EHP10067

ltem#	Apprx. Annual	<u>Description</u>	Unit Price	Total Cost
1	Usage 600 Per Enrolled Person	Enrollment Eligibility     Verification     Screening for Readiness to     Quit     Data and Reporting     Call Data and Database     Support and Educational     Materials     Media Campaigns     Surveillance and Evaluation     System Capability     Hours of Operation     Call Standards and Phone     Center System Capacity,     Expandability Staffing	\$110.00	\$66 000
2	600 Per Call	Telephone Coaching 1st Call up to 30 minutes	\$35.00	\$21 000
3	600 Per Call	2 <sup>nd</sup> Call up to 20 minutes	\$30 00	\$18 000
4	600 Per Call	3 <sup>RD</sup> Call 10-15 minutes	\$20 00	\$12 000
5	600 Per Call	4 <sup>th</sup> Call 10-15 minutes	\$20.00	\$12 000
			Total Cost	\$129,000

ward 1	will be made to the vendor with the besignated Project Administrator	Mike Wynn	eets specifications
2	In written response to this RFQ, the specification By signing the bid the		
	Milla Mars		Date 1/18/10

RFQ No \_ EHP 10067-

#### STATE OF WEST VIRGINIA Purchasing Division

# **PURCHASING AFFIDAVIT**

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate

#### **DEFINITIONS:**

WITNESS THE FOLLOWING SIGNATURE

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law, or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount

**EXCEPTION:** The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated

Vendor's Name beBetter Health Millie Li	NA
Authorized Signature: MIU Up	na Date: 1/78/10
State of West Virginia	
County of Kanawha to-wit:	
Taken subscribed and sworn to before me this 20d	ay of January 2010
My Commission expires <u>CF20</u>	
AFFIX SEAL HERE	NOTARY PUBLIC Day of Schwitt
	OFFICIAL SEAL
	Notary Public, State Of West Virginia Mindy Schmitt/beBetter Networks 109 Camina Street days (Revised 12/15/09)
	109 Cantini Stroutidavit (Revise) 12/15/09)

Charleston, WV 25301 My Commission Expires Oct 20, 2015 Rev. 09/08

# State of West Virginia

# **VENDOR PREFERENCE CERTIFICATE**

Certification and application" is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code**. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference if applicable.

1.	Application is made for 2.5% resident vendor preference for the reason checked:  Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
	Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
	Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid: or,
3.	Application is made for 2 5% resident vendor preference for the reason checked: Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
4./	Application is made for 5% resident vendor preference for the reason checked: Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5.	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years
requiren against :	inderstands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the nents for such preference the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency sted from any unpaid balance on the contract or purchase order
authorize the requ	nission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and es the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid ired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information by the Tax Commissioner to be confidential
and acc	enalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true curate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate such as during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.
Bidder:	Mike Wynn, beBetter Health Signed: Wilk Cynn
Date:	1/78/10 Title: Tobacco Cessation Account Manager
Check an	ny combination of preference consideration(s) indicated above which you are entitled to receive