

Request for Information



State of Alaska
Department of Health
Division of Public Health

RFI Number: 26-009
Date Issued: June 26, 2026

ALASKA BREAST & CERVICAL SCREENING ASSISTANCE PROGRAM (AK B+C) PROGRAM EVALUATION SERVICES

Introduction:

The Department of Health, Division of Public Health (DPH) is seeking a contractor with expertise in federally funded program evaluation, data collection, data management, and data reporting to perform analytic and evaluation support for the AK B+C (National Breast and Cervical Cancer Early Detection Program (NBCCEDP) state grantee). The contractor will carry out program evaluation activities that align with and improve upon the already established AK B+C Evaluation and Performance Measurement Plan. Activities include, but are not limited to:

- continuous tracking of data analysis projects completed
- bi-annual analysis of eligible population survey data
- late-stage cancer diagnosis trends
- implementation and interpretation of provider surveys
- annual analysis of Small Area Health Insurance Estimate data, internal program service delivery data, clinic screening data trends, and assessment of process and outcome measures
- submission of NBCCEDP required reporting.
- Ad-hoc projects. These may include activities such as analysis of statewide demographic data, hosting focus groups for priority populations, and the creation of public facing presentations.

Background Information:

The Alaska Breast + Cervical Screening Assistance Program (AK B+C) has been operating in Alaska since 1995. The overarching goals of the program are to decrease breast and cervical cancer incidence, morbidity, and mortality and to improve rates of cancer in populations experiences higher rates of disease. The program navigates within a complex environment of a highly dispersed population with many isolated communities, high transportation costs, limited local public health infrastructure, and areas that are medically underserved. The program seeks to address the breast and cervical cancer screening needs of low-income populations. AK B+C covers the out-of-pocket costs of breast and cervical cancer screening for Alaskan women ages 21-64 with income at or below 250% FPL. AK B+C contracts with health care providers all over Alaska who agree to participate in the program and be reimbursed for breast and cervical cancer screening services for enrolled program participants.

AK B+C is part of the National Breast and Cervical Cancer Early Detection Program funded by the Centers for Disease Control and Prevention (<https://www.cdc.gov/cancer/nbccedp/index.htm>). Per the NBCCEDP guidance, strategies AK B+C works under to accomplish program goals include:

1. Using Cancer Data and Surveillance
2. Supporting Partnerships for Cancer Control and Prevention

3. Delivering Breast and Cervical Cancer Screening
4. Implementing Evidence Based Interventions
5. Evaluating and Monitoring the Program

The program monitoring and evaluation activities that support the strategies above include:

1. Participate in CDC-led program monitoring, evaluation, and dissemination activities including periodic data quality reviews (minimum data elements (MDE), clinic data), quarterly program updates, annual program survey, and annual success story submissions.
2. Conduct process and outcome evaluation to assess all program activities.
3. Evaluate your program's activities to connect program-eligible women from the community to completed breast and cervical cancer screening at partner clinics.
4. Submit an annual evaluation report to CDC summarizing program monitoring and evaluation findings, including your program's effectiveness at reaching identified populations that experience higher rates of breast and cervical cancer with screening and diagnostic services. Describe how findings were used for program improvement and to identify and disseminate best practices.
5. Establish and maintain a patient-level data system to collect and report to CDC the required patient-level data (minimum data elements) used to monitor and track screenings, outcomes, and treatment referrals for women served, according to CDC performance standards. For women diagnosed with cancer, link MDE records with cancer registry records to obtain cancer staging data in the MDE.
6. Regularly review and use the patient-level data (MDEs) to ensure screening completion and improve the timeliness of diagnostic and treatment referrals.
7. Collect and report baseline and annual clinic-level data records for clinics implementing evidence-based interventions (EBI), including clinic-level screening rates, according to CDC guidance.
8. Regularly review and use clinic-level data, including clinic screening rates and EBI implementation data to monitor progress and identify areas for program improvement.
9. Share monitoring and annual evaluation findings with appropriate partners, including screening providers and clinics where EBIs are implemented, to facilitate program improvement.

Program monitoring and evaluation activities have been done by State of Alaska staff in the past, and the project team is familiar with the work and available to answer questions during the initial phase of implementation. The expectation is that the program evaluation contractor will bring knowledge and expertise to build and improve upon the current program evaluation activities.

Program Year 1 of the NBCCEDP grant began July 1, 2022, and the current award cycle runs through June 30, 2027. This program has been in place here at the State since the 1990's; continuation is not guaranteed but it is highly expected.

The Alaska Department of Health has already completed some portion of the grant requirements above, including the initial evaluation plan and logic model which includes the process and outcome measures that require ongoing assessment. Additionally, the program has a Data Manager, who is responsible for maintaining the patient-level data system, reviewing MDEs and reporting those data to CDC, and managing the collection of baseline and annual clinic-level data records. The remaining program monitoring and evaluation activities will be the responsibility of the evaluation contractor with guidance from the Program Director.

Response Information:

Interested parties are invited to submit responses to the following:

1. Provide the vendor's complete company name, address, telephone number and email address for the vendor's contact person for its RFI response.
2. Please provide a brief overview of your organization, including its history, mission, and experience with evaluation projects. If you are submitting a collaborative response with another organization, please identify the lead entity and key contact person(s).
3. Provide a general description of your company or organization's capabilities and experience related to program evaluation. A description of specific experience with software, programming, analysis, data management skills, and evaluation concepts. Specifically identify experience with software such as SQL, SAS, R, Python, SPSS, ArcGIS.
4. Demonstrated use of public health concepts such as translation and interpretation of population-level and programmatic data for different audiences, and the analysis of results to assist with decision-making.
5. Offerors must provide comprehensive narrative statements that set out the methodology they intend to employ and illustrate how the methodology will serve to accomplish the work and meet the state's goals and project schedule.
6. Offerors must include a timeline and resource allocation chart for all deliverables required by this RFI to meet the project needs.
7. Offerors must demonstrate clearly if they have the hardware, software, equipment, and licenses necessary to perform the contract.
8. A description of specific experience and compliance with HIPAA protocols that ensure patient confidentiality. Offerors must describe how they will manage HIPAA compliance by all team members who work on this project.

Interested parties who believe they can provide the services described in this RFI must submit their response in writing via email by **2:00 PM Wednesday, July 08, 2026**, to the following person:

Haley Wilkinson

Procurement Specialist
Department of Health
Division of Finance and Management Services

Phone: 907-759-3312

Email: haley.wilkinson@alaska.gov

Please also copy doh.procurement.proposals@alaska.gov on the submission.

Responses in Microsoft format are preferred, with attachments submitted in pdf, Microsoft Word, Adobe, Microsoft Excel or PowerPoint file.

It is the responsibility of the interested party to follow up with the person listed above to ensure your response was received prior to the time and date specified. Please ensure the response includes your company's name and contact information (email) for the individual(s) who should be notified if DOH releases a solicitation or seeks an alternative procurement method.

Important Notice:

This RFI does not extend any rights to prospective vendors or obligate the state to conduct a solicitation or execute a contract. Nor will the State be financially responsible for any costs associated with the preparation of any response to the requested information. This RFI is issued for the sole purpose of obtaining information as described in this notice. However, the information obtained from this request may be used to prepare a solicitation or contract in the future.

Disclosure of Response Contents:

If a solicitation or contract results from this RFI, all response information, including the name of the respondent, will be held confidential until the time a Notice of Intent to Award is issued. If a contract is executed responses will be held confidential until the time of contract execution. Thereafter, responses will become public information.

The Alaska Public Records Act (ARPA) requires public records to be open to reasonable inspection.

Trade secrets and other proprietary data contained in responses may be held confidential if the respondent requests that in writing to the procurement officer, and if the procurement officer agrees in writing. The respondent's request must be included with the response, must clearly identify the information to be held confidential, and include the reasons for confidentiality.