

Answers to BRFSS RFP 2009 Questions Received by Sept. 10, 2008
(these are in temporal order of receipt)

1. What is the likely length in minutes of the 2009 landline questionnaire?

The 2009 Questionnaire is yet to be finalized, but we are shooting for something no longer than the 2008 questionnaire which averages 23 minutes.

2. What version of the questionnaire (full or abridged) will be used for both the mail and telephone component with nonrespondents?

Abridged for paper. See #6. The mail out is supposed to go out to the landline households that could not be completed after 15 attempts (see below). If the mail-out questionnaire receives no response, then the number goes back for 15 more attempts with the landline interview. Note that these households will also have received an advanced letter prior to calling.

3. The contract is supposed to start on Jan. 1, 2009 but there are many tasks given that are necessary to be performed before that data such as questionnaire programming and the field test of the questionnaire. How will this be accommodated?

Refer to section 5.1 "All quotations must be fixed cost bids for specific deliverables. No time and materials contracts will be considered." VDH is paying for the completion of interview data collected between Jan. 1, 2009 and Dec. 31, 2009, and how the contractor proposes to accomplish this is among the objectives of the RFP. If your company needs to work from, say, Dec. 15, 2008, to Feb. 1, 2010, to deliver the interview data described in the RFP, that should be described in your strategies. However, for contract purposes, the State of Vermont needs the specify the time period in which the interviews are accomplished.

4. Please elaborate on the rigorous field testing required before January 1, 2009. Is this a pretest? If so, how many completed surveys would be considered "rigorous"?

In the past, well-experienced interviewers have been able to provide valuable pretest information in as little as 3 interviews. Changes to the questions after the first month is *prima facie* evidence that the pretest was inadequate.

5. Page 4: Contractor shall be responsible for obtaining the telephone sample... Does this mean that CDC will not be providing the sample and that we need to cost for the purchase of the landline sample?

No, the contractor will inform the CDC on a quarterly basis how much sample CDC should deliver. It will be at no cost to the contractor other than the contractor statistician's time doing the sample calculations.

6. Page 5 - please clarify: B.3. Telephone Survey with Nonrespondents of Direct Mail Survey. Our understanding based on the CDC guidance to date is that the telephone survey of non-respondents refers to those who have refused (not hard refusals) or not been reached within the 15-call attempt protocol RATHER than those who do not respond to the mailed questionnaire. Please clarify what Vermont expects from this component.

CDC may change their minds, but as it is understood at this point, the mail-out goes to the landline households that soft-refuse or cannot be contacted in 15 attempts AND for whom a non-returned advanced letter was sent. That is, all households in the sample that have a matched, valid address will get an advanced letter, and possibly get a mail-out questionnaire if they soft-refuse or cannot be contacted in 15 attempts. If the household does not return the paper questionnaire, CDC is proposing that the household be put back into the telephone calling pool for 15 more attempts.

7. Page 5 - Minority sample. Is there any requirement of the breakdown between hispanic/black/Asian/etc. or is it sufficient to get 600 minority interviews of any type?

Minorities of any type will suffice. Respondents refusing or don't know their race/ethnicity are *not* to be considered a minority. White-non-Hispanics are the majority in Vermont.

8. Page 6 - data cleaning. Please clarify if this is monthly schedule or only when the quarterly data is assessed by CDC.

VDH wants monthly data submissions in order to catch problems as soon as possible. However, early in the year, CDC has delayed its edit program it sends to contractors, so expect some leeway on this schedule. VDH personnel examine data files sent to CDC as well as the resulting data coming back from CDC.

9. Page 7 - Currently the CDC requires data submission by the 20th of the month after the survey month. Is it possible to reduce the requirement of data submission by the 10th of the month?

Most months, interviewing is accomplished by the 27th of the month, and often the contractor's time stamp on the data is prior to the end of the month; so data submission usually occurs in this timeframe of receiving the data by the 10th of the month. As mentioned before, delays in software from CDC have delayed data submission for 3 months, however, once everything is in place with ongoing data cleaning and preparation, the current contractor achieves this timeframe in good course.

10. Page 13 - please clarify the exact RFP designation which is to be shown on an express delivery envelope or box.

For Fedex and UPS, etc, delivery:
Rod McCormick, Ref: BRFSS RFP
Room 304 Vermont Department of Health
108 Cherry Street
Burlington, Vermont 05401

11. Page 17 - Cost proposal. Can you give the approximate number of questions or time for the 2009 core, optional modules and state-added questions?

While the 2009 is still in the proposal stage, expect the average length of the interview to be 23 minutes. Base your bid on this timing. If the 2009 timing is different, it will be part of the negotiation stage to reach an equitable contact.

12. Please clarify if the transmittal letter and/or insurance certificate and/or financial statements should be considered within the 30 page response limit. Right now they are but I want to clarify that this is intended.

These are exempted from the page limit

13) Does the VDH want advance letters mailed to households in the minority oversample where addresses are available?

No. To emphasize, for the minority oversample, the contractor will provide or purchase the appropriate sample. CDC . This study is separate from the main BRFSS survey and does not involve the CDC.

14) At which place in the proposal should contractors include their work plan - in Response Section II or Response Section VI?

Since the scoring of the proposal will follow the response guide, please respond appropriately and in temporal order to each bullet point (each bullet represents scoring points). We are not willing to wade through "boilerplate" trying to find responses to each of these items.

15) Who is responsible for formatting the mail version of the survey?

We are hoping CDC will provide this. If not, VDH will.

16) Who is the incumbent?

The incumbent is Clearwater Research, Inc. of Boise, Idaho.

17) What is the value of the current contract, and how many years does this include?

The current contract is in its third year and the maximum payable amount is \$738,843. Note that this includes the adult and child asthma callback survey, which ran out of funding for CY 2009.

18) What was the average interview length in 2007, and what is the average interview length in 2008?

21 minutes in 2007, and 23 minutes in 2008 so far, not including the asthma callback study (but does include the permission to callback question).

19) At the top of page 20, it states..." Retainage will be paid upon successful completion of the contract." Can you please define "successful" and what is the penalty schedule?

CDC accepting the contractor's data submissions defines "successful". The maximum retainage is stated on page 20.

20) Will the contract's period of performance be structured to accommodate the preparation work required in order to assure a January 1st start date for data collection, as well as work required following completion of data collection (December 31)?

Refer to #3 above.

21) Response Section I requires contractors to show that they have been in business continually for the last three years. [Our Company's] audited financial statements include the two most recent fiscal years. Are you requiring two sets (two years each) of financial statements to document this?

Whatever encompasses the three years required by the State of Vermont will work. An auditor's summary page should suffice at this stage.

22) On page 14, 5.7, it states that proposals shall be no longer than 30 pages, excluding resumes, the cost proposal, and references. Does this page limit also exclude Section I - Transmittal Letter and Insurance - and all of the accompanying documentation that is to be included as an attachment? Does the page limit also exclude Section IX Exceptions, and Section X Acceptance of RFP and State Contract Conditions?

See #12 above. Section IX is in the 30 pages, since it pertains to which activity was not addressed. Section X is included in the 30 pages since a brief statement should suffice, and any unwillingness to abide by RFP and contract requirements tends to lead to rejection of the bid.

23) **Standard BRFSS Survey:** Specifically what disposition codes from the standard BRFSS will constitute as non-response for the direct mail (paper) survey?

See #2 above. Specific codes is the purview of the CDC for consistency across states. Unwillingness to abide by CDC BRFSS standards is a basis for rejection of a bid.

24) **Racial / Ethnic Minority Survey:** For the racial/ethnic minority oversample, does a "representative sample" have to come from a probability sample design (like RDD)? Or would it be permissible to establish quotas for the specified racial/ethnic minority groups to reflect the distribution in the general population for the geography, and then and use targeted (non-probability) sampling to fill those quotas (much like the sampling for a focus group recruit)?

See #7 above and #37 below. The hope is to incorporate the over sample into the main survey so that there will be sufficient number of interviews to say something accurate about the non "White-non-Hispanic" population in Vermont. We do not expect enough accuracy to say anything about particular racial/ethnic group.

25) Will the abbreviated questionnaire for the racial/ethnic minorities surveys be the 2009 BRFSS core or a shortened version of it?

The 10 minute version is likely an abbreviated core, while the 15 minute version should be the core plus, depending upon what CDC includes in the core.

26) **Direct Mail (Paper and Landline) Surveys:** Will the programming and questionnaires for the direct mail surveys (paper and landline) be provided by CDC?

At this time, we expect CDC to provide such.

27) Do the regular BRFSS protocols apply for the direct mail (landline) surveys with non-respondents of direct mail (paper) survey?

CDC is yet to inform Vermont of any protocols for the direct mail surveys, other than the mail surveys will go to soft refusals or those households that were contacted 15 times without success and for whom we have a valid matched mailing address. CDC implied that there will be one questionnaire mail out, a post card follow-up, then a second questionnaire mail out. This has yet to be confirmed. Please make your bid based on a similar approach, for comparison purposes. See #38 below

28) For the direct mail (landline) survey, what factors constitute as non-response from the direct mail (paper) survey?

The questionnaire not being returned within a requested timeframe would for VDH purposes constitute a non-response to the mail-out. While CDC has not informed VDH of its mail-out protocol, it has suggested that the mail-out can be for just a few months, although CDC has yet to confirm this in writing.

29) Will there be additional disposition codes for the direct mail (paper and landline) surveys assigned by CDC? For example, to take into consideration direct mail (paper) surveys that are returned because they are undeliverable?

Since we are sending out advanced letters to households that have a matching address, this should obviate most of the problem. The returned advanced letter addresses will be deleted from the questionnaire mail-out list. Hopefully, CDC will provide such codes.

30) Has the data layout and file type for the direct mail (paper) survey been determined?

Nothing is final yet for the main 2009 questionnaire.

31) Will the data file(s) for the direct mail (paper and landline) surveys be separate from the standard BRFSS data file? And/or will the direct mail (paper and landline) survey data need to be merged with the month in which the standard BRFSS sample came out of? Or the month the survey was returned (paper)/completed (landline)?

The last CDC has said, (albeit not in writing) these would be separate files. Their data would be used to "adjust" the main landline survey results. CDC indicated an option, not yet confirmed, that the cell phone only and the mail-out will be for a limited to a few months.

32) What is the preferred length of time that we should allow a direct mail (paper) survey to be completed before it is considered a non-response and therefore eligible for the direct mail (landline) survey?

The CDC has yet to say. If past experience is a guide, response tapers off markedly after two weeks.

33) Has CDC released protocol for the direct mail (paper and landline) surveys? If so, where can we obtain a copy.

No, VDH has not received such.

34) Under 'Sample and Survey Preparation', the RFP calls for "rigorous field testing of the 2009 questionnaire". Does this imply a formal pretest and if so how many cases would the State regard as appropriate?

Refer to #4.

35) The cell phone stratum of 400 cases is [composed] of cell phone-only respondents (no landline). We are assuming that the CDC-provided sample consists of cell phone exchanges but is not otherwise screened for cell phone-only status. Can you estimate the prevalence for Vermont of the cell phone-only group within the larger cell phone sample?

Not entirely. Our only "data" is with the WIC population which roughly indicates ~40% are accessible via cell phone and 22% is accessible via cell phone only. It appears that among this group, roughly ~50% of cell phone users have that as their only phone.

36) For the mail survey of CATI non-responders, should we assume that these will be drawn only from households with an address based on the reverse look-up done for the advance letter mailing?

Yes, CDC will provide the matched addresses as it does now for the advanced letters. Note that advanced letters with invalid addresses are returned to VDH, which are marked on a spreadsheet as "returned" and the spreadsheet is forwarded to the contractor to be included with the data file. For the mail-out, only those with a valid advance letter address would be available for a mail-out questionnaire in the event that the household is a soft refusal or not complete after 15 attempts.

37) A quick examination of the CPS indicates that racial/ethnic minorities are not proportionally distributed around the entire state. Using a statewide equal probability sample and screening for race/ethnicity could require a very large number of calls and a very large budget in order to obtain 600 cases. Would the State entertain a sampling protocol that focused on areas with higher concentrations of minorities?

Yes, we expect the sampling to be regionally or telephone exchange focused.

38) For the direct mail component to non-responders, should we assume a single mailing only in order to control costs, or should we propose a multi-wave mail protocol that would cost more but yield a higher response rate?

The CDC has yet to give us their final protocol, but in the CDC pilot, it was questionnaire, with postcard follow-up, then a second questionnaire mail-out. Please make your bid based on a similar approach, for comparison purposes. (At last telling, the CDC said that the mail-out could be limited to a few months rather than the entire year; and would be used to adjust values in the landline survey. This has yet to be confirmed in writing, however.)