



Notice of Intent to Award

To all interested parties:

DATE: February 5, 2026

TO: All Interested Bidders

RE: Notice of Intent to Award Request for Proposal Number:
COMPADM26003
Request for Proposal Title: Communities of Care Technical Assistance
Provider

The Iowa Department of Health and Human Services (Agency), Lucas State Office Building, Des Moines, Iowa 50319, announces its intent to award to the apparent successful bidder(s):

Iowa Primary Care Association

As provided for in the RFP, this Notice of Intent to Award is subject to execution of a written contract. As a result, this Notice does NOT constitute the formation of a contract between the Agency and the apparent successful bidder. The bidder shall not acquire any legal or equitable rights relative to the contract services until a contract is executed. If the apparent successful bidder fails to negotiate and execute a contract with the Agency, in its sole discretion, the Agency may revoke the Notice and enter into contract negotiations with another bidder or withdraw the RFP. The Agency further reserves the right to cancel the Notice at any time prior to the execution of a written contract.

Thank you for participating in the competitive selection process. For information about this Notice, please contact the issuing officer at the telephone number or email address listed below.

John McMullen

Phone# 515-416-8565

john.mcmullen@hhs.iowa.gov

Enclosure: Review of Notice of Intent to Award Decision

This Communities of Care Technical Assistance Provider is supported by the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling approximately \$6,000,000.00 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official view of, nor an endorsement, by CMS/HHS, or the U.S. Government.

Review of Notice of Intent to Award Decision.

Bidders may request reconsideration of this intent to award decision by submitting a written request to the Agency:

Bureau Chief

c/o Bureau of Service Contract Support
Department of Health and Human Services
Lucas State Office Building
321 E 12th Street
Des Moines, Iowa 50319-1002
email: reconsiderationrequest@hhs.iowa.gov

The Agency must receive the written request for reconsideration within five calendar days of the date of a notice of intent to award, exclusive of Saturdays, Sundays, and legal state holidays. The written request may be emailed or delivered by postal service or other shipping service. Do not deliver any requests for reconsideration to the office in person. It is the Bidder's responsibility to ensure that the request for reconsideration is received prior to the deadline. Postmarking or submission to a shipping service by the due date shall not substitute for actual receipt of a request for reconsideration by the Agency.

The request for reconsideration shall clearly and fully identify all issues being contested by reference to the page and section number of the RFP. If a Bidder submitted multiple Proposals and requests that the Agency reconsider a notice of intent to award decision for more than one Proposal, a separate written request shall be submitted for each. At the Agency's discretion, requests for reconsideration from the same Bidder may be reviewed separately or combined into one response. The Agency will expeditiously address the request for reconsideration and issue a decision. The Bidder may choose to file an appeal with the Agency within five calendar days of the date of the decision on reconsideration, exclusive of Saturdays, Sundays, and legal state holidays, and in accordance with 441 Iowa Admin. Code Ch. 7.