

NOTICE OF INTENT TO AWARD

TO ALL INTERESTED PARTIES:

DATE: September 25, 2026

RE: Notice of Intent to Award Request for Proposal Number: PHTHORC27001
Request for Proposal Title: Iowa Rural Residency Program

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

Mary Greeley Medical Center

Unity Point – Des Moines

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 Respondent. The Respondent shall not acquire any legal or equitable rights relative to the contract services until a contract is executed. If the apparent successful Respondent 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 Respondent or withdraw the RFP. The apparent successful Respondent(s) is advised that no project activities may be initiated, and no funds may be obligated or expended, until a written contract has been fully executed by all parties. Any work performed or costs incurred prior to contract execution shall be at the Respondent's sole risk and will not be reimbursed by the Agency. The Agency further reserves the right to cancel the Notice at any time prior to the execution of a written contract.

Appeals and Review Procedures

Notice of Intent to Appeal

To contest an Agency's decision for disqualification or award decision, Respondents must submit a written Notice of **Intent** to Appeal within five (5) calendar days from the date on the Notice of Disqualification or the date on the Notice of Intent to Award, whichever is earlier. If the fifth day falls on a weekend or state holiday, the Respondent gets until the next business day to submit their Notice of Intent to Appeal.

The Notice of Intent to Appeal must:

- Be submitted via email to hhsopenrecords@hhs.iowa.gov and reconsiderationrequest@hhs.iowa.gov.
- Identify all procurement records being requested pursuant to Iowa Administrative Code 7—2506.102(5) Public Records in Vendor Appeals.

Notices submitted through any method other than email will not be accepted. It is the Respondent's responsibility to ensure receipt by the Agency.

Notice of Appeal: First-tier Review (Reconsideration)

To request a First-tier Review: Upon the Agency's release of allowable documents or initial disclosures, the Respondent, pursuant to Iowa Administrative Code 7—2506 must submit a Notice of Appeal (formally known as a reconsideration) within five (5) calendar days. If the fifth day falls on a weekend or state holiday, the Respondent gets until the next business day to submit their Notice of Appeal. The Notice of Appeal will trigger a First-tier review by the Agency.

Notice of Appeal for first-tier review must:

1. Be submitted via email to reconsiderationrequest@hhs.iowa.gov. Respondents may request a read receipt. Requests submitted through any other method may not be accepted.
2. The Respondent's contact information, including contact information for the individual filing the notice of appeal, the individual's association with the appealing Respondent, and a showing of the individual's authority to appeal on behalf of the Respondent;
3. Details of the award decision and clearly identify all contested issues; as well as why and how the Respondent is aggrieved by the decision. Reference the applicable page number(s) and section number(s) of the RFP. The legal and factual reasons for the Respondent's appeal, including references to the relevant grounds of appeal as set forth in Iowa Code section 17A.19(10);
4. The relief the Respondent is seeking.

Multiple Proposals: If a Respondent submitted multiple Proposals and wishes to contest decisions affecting more than one Proposal, the Respondent must submit a separate Notice of Intent to Appeal and a separate Notice of Appeal for each Proposal. The Agency may, at its discretion, review these requests separately or consolidate them into one response.

Agency Decision on First-tier Review

The Agency will review and issue a written decision on the First-tier review expeditiously.

Notice Seeking Second-tier review = Appeal Hearing

A Respondent who wishes to further challenge the Agency's First-tier review decision may request a Second-tier review, which is an Administrative Hearing. A Notice seeking Second-tier review must be submitted within five (5) calendar days following the date of the Agency's First-tier review decision. If the fifth day falls on a weekend or a State holiday, the Respondent has until the next business day to submit their Notice of Appeal. A Notice seeking Second-tier review must be filed in accordance with Iowa Administrative Code 7-2506.103(2). Notice from a Respondent seeking Second-tier review must:

- Be submitted to: appeals@hhs.iowa.gov.
- Comply with rule 2506.102(3), it must refer to the first-tier review decision instead of the award decision.