

| Exhibit E, Primary Health Care Program Evaluation Tool RFA No. HHS0015299 Criteria, Subcriteria Sheet | | | | |
|--|---|-------------|-------|----------|
| Evaluator | | | | |
| Respondent | | | | |
| # | Criteria | Weight | Score | Comments |
| 1 | Service Area Unmet Access to Care | | | |
| 1.1 | Evaluate the Respondent's description of local need for primary and preventative health services. | 20% | | |
| 1.2 | Evaluate the Respondent's use of qualitative and quantitative data. | 20% | | |
| Subtotal | | 40% | | |
| 2 | Proposed Work | | | |
| 2.1 | Evaluate Applicant's proposed activities, processes, and methodologies to be implemented as part of this Project. | 30% | | |
| 2.2 | Evaluate the Respondent's description of facilities and partnerships to ensure eligible clients are able to access all required services. | 30% | | |
| Subtotal | | 60% | | |
| TOTAL (%) | | 100% | | |

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| Evaluation Scoring Guide | | |
| Score | Level | Description |
| Unacceptable | 1 | Response does not address requirement. Response is completely unacceptable. |
| Unacceptable | 2 | Response mentions requirement, but is not responsive to the elements of the requirement. |
| Unacceptable | 3 | Response addresses requirement, but response described does not allow the agency to fulfill mission. |
| Marginal. Fails to meet evaluation standards but failures are correctable. | 4 | Response meets fundamental requirements, however could not be implemented as described (would require both the agency and Respondent to make significant changes not currently anticipated). |
| Marginal. Fails to meet evaluation standards but failures are correctable. | 5 | Response meets fundamental requirements, however could not be implemented as described (implementation would require both the agency and Respondent to make minor changes not currently anticipated). |
| Marginal. Fails to meet evaluation standards but failures are correctable. | 6 | Response meets fundamental requirements, however could not be implemented as described (implementation would require changes to be made by Respondent only). |
| Acceptable | 7 | Response clearly satisfies requirement but has some minor weaknesses. |
| Acceptable | 8 | Response clearly satisfies requirement. |
| Acceptable | 9 | Response satisfies requirements and has some benefits above requirement. |
| Exceptional | 10 | Response far exceeds all aspects of requirement. |

For the purposes of this exhibit, "the agency" means the contracting state agency as specified in the solicitation.

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|--|-----------------------------------|--------|
| No. | Best Value Criteria | Weight |
| 1 | Service Area Unmet Access to Care | 40% |
| 2 | Proposed Work | 60% |
| GRAND TOTAL | | 100% |