

# 2023 COMMERCIAL TOBACCO EQUITY RFP

Eliminating commercial tobacco use and supporting communities' cultural practices for their sacred medicines.

Responses due: August 7, 2023, 1:00 p.m. CST  
Letter of interest due: June 30, 2023, 1:00 p.m. CST

## WHO WE ARE

Funded through proceeds from the historic lawsuit Blue Cross and Blue Shield of Minnesota (Blue Cross) filed against the tobacco industry, the Center for Prevention at Blue Cross (Center) was created and works to advance racial and health equity to transform communities for a healthier Minnesota. We have a vision that racism no longer determines health outcomes, and all people can attain their highest level of health.

To achieve this, the Center invests in community funding programs, public awareness campaigns, and actively advocates for policy, systems and environmental (PSE) changes to advance community health and health equity across the state.

Visit [www.CenterforPreventionMN.com](http://www.CenterforPreventionMN.com) for more information.

## INVITATION TO PROVIDE INFORMATION

We are excited to ask for your project proposal for our three-year Commercial Tobacco Equity funding initiative. We are seeking to fund organizations up to \$150,000 per year to showcase innovative, successful commercial tobacco work. Projects that are selected for funding are eligible for renewed support, based on contract compliance and annual satisfactory progress.

## PROJECT OVERVIEW

Fourteen percent of adult Minnesotans smoke and the prevalence of commercial tobacco use is much higher among certain groups. The problem is about more than just numbers. It's also about the growing influence of new products and the tobacco industry's targeting of certain populations in our state. That's why our goal is to eliminate access to and use of commercial tobacco in Minnesota, especially in communities most impacted by commercial tobacco-related health inequities.

Traditional tobacco has been used for spiritual and medicinal purposes by Indigenous people for generations, and is central to their culture, spirituality and healing. This lifeway was prohibited, which led to increases in commercial tobacco use as a replacement for traditional tobacco until the American Indian Religious Freedom Act passed in 1978. Due to these forced cultural shifts, commercial tobacco use became a driver of health inequities among Indigenous communities. For these reasons, the word "commercial" has been added to this document to acknowledge and honor the use of traditional tobacco and distinguish between traditional tobacco and commercial tobacco. (Minnesota Comprehensive Commercial Tobacco Control Framework: 2022 - 2026)

In this initiative, Blue Cross seeks to fund community-driven change to:

1. Advance policies that impact communities disproportionately affected by commercial tobacco, and
2. Support and advance systems and environmental changes in communities most targeted by the tobacco industry.

Blue Cross supports approaches that use PSE changes (see glossary of terms) and acknowledge that culture is prevention. PSE changes that are developed and led by communities deliver the most effective solutions to countering the tobacco industry's influence. Communities create their environments that are free from the harms of commercial tobacco, supporting community members to make healthy choices. Submitted projects' goals and actions should lead with racial and health equity, that drive both processes and outcomes.

**PSE changes we will fund are shown below in A–D. Applicants may propose a project that addresses one or a combination of these:**

A. Local and Tribal Policies that:

- Eliminate or restrict the sale of menthol and other flavored commercial tobacco products.
- Regulate commercial tobacco product pricing and discounts/promotions.
- Regulate the location, density, number and type of commercial tobacco retailers.
- Prohibit the delivery and/or online sales of commercial tobacco products.

B. Resolutions, Laws and Regulations enacted by Tribal Nations that:

- Create commercial tobacco-free grounds.
- Create commercial tobacco-free tribal casinos.
- Create other solutions to protect their people and lands from the harms of commercial tobacco.

### C. Systems Change that:

- Integrates commercial tobacco treatment into mental health and substance use disorder treatment services and at the same time creates commercial tobacco-free grounds at their locations.

### D. Environmental Changes that:

- Engage community members to develop messaging and communication campaigns that support PSE changes listed in A and B above.
- Engage community members to develop cultural and community-specific educational interventions that create healthy environments for those most impacted by the harms of commercial tobacco. This strategy should consider the community context and environment, including where community members gather, live, work, and play.
- Support the growing, harvesting and use of traditional and sacred tobacco by Native Americans, this includes “caṅsasa” (Dakota) or “asemaa” (Anishinaabemowin) by area tribes.\*
- Create environmental changes, led by specific communities and their leaders to assess and transform cultural practices that currently involve commercial tobacco, such as wedding or funeral ceremonies, hookah use at gatherings, or gift giving, and create culturally responsive alternatives to commercial tobacco use.\*

\*These items must involve culturally-specific education and be led by the communities where this change is occurring.

## ELEGIBILITY CRITERIA

Funding will be provided only to Minnesota-based organizations that meet the following criteria:

- Eligible Applicants must be one of the following:
  - Nonprofit organization with 501(c)(3), 501(c)(4), or 501(c)(6) classification with the Internal Revenue Service;
  - Federally Recognized Minnesota Tribal Nation; and
  - An organization with a fiscal sponsor that meets the requirements above.
- Non-eligible applicants that may be considered as a subcontractor for an eligible applicant include:
  - Unit of local government; and
  - A for-profit entity.
- Non-eligible applicants include:
  - Partisan organizations/Political Action Committees; fundraising, capital, or political campaigns;
  - Private foundations;
  - Organizations that discriminate based on race, religion, gender, gender identity, national origin, citizenship, status, age, disability, sexual orientation or veteran status; and
  - Organizations that accept funds and/or sponsorships from the commercial tobacco industry and their subsidiaries.

## ADDITIONAL GUIDELINES

- Applicants can propose projects that require less than the maximum annual funding amount and/or require fewer than three years to complete.
- Applicants may consider a planning period as part of their proposed project.
- Blue Cross must be the sole health plan funder of this project.
- If your Proposal is unable to meet one of the criteria outlined in the Eligibility Criteria or Other Requirements section(s), or if you believe your project should be exempted from any of these criteria, please include a short (150 words or less) explanation.

## APPLICATION PROCESS AND PREPARING YOUR APPLICATION

Applicants selected for funding will receive a one-year contract. Based on contract compliance and annual satisfactory progress, this contract will be renewable for up to three years. The maximum period of funding for selected applicants will be January 1, 2024 – December 31, 2026.

The application process:

- All potential applicants are asked to submit a letter of interest to [chris.matter@bluecrossmn.com](mailto:chris.matter@bluecrossmn.com) by June 30, 2023, 1:00 p.m. CST. Please include the specific PSE Changes listed under A, B, C, and/or D that you are interested in pursuing for this project. The letter of interest is only requested for planning our review process of proposals. It will not be considered in the review process.
- All applicants will need to submit a proposal following the requirements in this RFP. Based on internal review of the submitted proposal, Blue Cross will conduct site visits from September 19 through September 29, 2023, of applicant finalists before making final funding decisions and negotiating contracts with successful applicants. All applicants are subject to successful contract negotiations between the applicant and Blue Cross.
- An informational webinar will be made available on Thursday, June 22, 2023, at 3:00 p.m. CST. The video will remain available for viewing until the application deadline.

Applications must be submitted via the Blue Cross' online application system at (<https://bcbsmn.Smartsimple.com>) no later than **Monday, August 7, 2023, at 1:00 p.m. CST**. For more information on how to submit your application, visit [link to website announcement page w portal log in].

## APPLICATION QUESTIONS

Be prepared to answer the following questions when first making your online profile in our funding portal. You may wish to complete your application in a word processing document and copy the content into the application portal later.

## CONTACT INFORMATION

Primary contact name:

Title:

Primary contact phone number:

Primary contact email address:

## GENERAL INFORMATION

1. Project title, start date and end date.
2. What is the total dollar amount of this request?
3. Are you using a fiscal sponsor for this project?
4. Provide a brief summary of your organization's mission and current program activities. (Typical response is between 200 - 400 words.)
5. Has your organization previously received funding from BCBSM, Inc. d/b/a Blue Cross and Blue Shield of Minnesota (Blue Cross) or the BCBSM Foundation, Inc. d/b/a Blue Cross and Blue Shield of Minnesota Foundation either directly or by subcontract? For Blue Cross, this includes funding from the Center for Prevention or other departments part of Blue Cross.

## DEMOGRAPHICS

### Racial and/or Ethnic group(s) served by this request:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Asian American/Pacific Islander/Asian      | <input type="checkbox"/> Black/African American/African | <input type="checkbox"/> Hispanic/Latino/Latina/Latine                    |
| <input type="checkbox"/> Native American/American Indian/Indigenous | <input type="checkbox"/> White/Caucasian/European       | <input type="checkbox"/> Multi-Racial/Multi-Ethnic (2+ races/ethnicities) |
| <input type="checkbox"/> Additional Ethnicities                     | <input type="checkbox"/> Unknown                        | <input type="checkbox"/> Decline to State                                 |

**Do you have culturally specific programming at your organization?** Yes or No

**Does your project serve immigrants and/or refugees?** Yes or No

### Population served by this project identifies as the following sexual orientations: (Select all that apply)

- Gay, lesbian, bisexual, or other sexual orientations in the LGBTQIA+ Community
- Heterosexual or straight
- Unknown
- Decline to state

### Population served by this project identifies as the following gender: (Select all that apply)

- Transgender
- Non transgender (cis gender)
- Unknown
- Decline to state

### Age group served by this request:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Early Childhood (under 5) | <input type="checkbox"/> Children (5-12)    | <input type="checkbox"/> Teens/Young Adults (13-24) |
| <input type="checkbox"/> Adults (25-64)            | <input type="checkbox"/> Older Adults (65+) |   |

Please list any additional communities of focus for your project that are not included above.

## GEOGRAPHIC AREAS

Geography	Geographic Region Name
Statewide, defined as any project extending throughout the state of Minnesota without further defining a specific geography. Yes/no	
County(ies) – if area served is a Tribal Community or Reservation, please also select County/ies where Tribal Community or Reservation is located.	
City/ies, if applicable	
Neighborhood, if applicable	
Other, if applicable	
Tribal Communities or Reservations	Choose from Bois Forte, Fond du Lac, Grand Portage, Leech Lake, Lower Sioux, Mille Lacs, Prairie Island, Red Lake, Shakopee Mdewakanton, Upper Sioux, White Earth

## RFP QUESTIONS

1. Does your organization have a formal Racial or Health Equity/Inclusion policy or statement? If so, please upload your document with the other attachments below.
2. What are your organizational goals around diversity, equity, inclusion, and belonging? Please provide accomplishments or other examples of progress on these goals. (Typical response is between 200 - 400 words.)
3. Provide a brief (1-2 paragraph) summary of the work you plan to do. (Typical response is 100 words.)
4. Please describe the population served by the project. (Typical response is 250 words.)
5. Describe how the population above is reflected and engaged in the leadership of your organization. (Typical response is 250 words.)
6. Which issue area(s) does your proposed project seek to address?
7. What are the goal(s) of your project and how do these advance racial and health equity? What types of policy, systems, and environmental changes are you working toward? See page 2 for the PSE changes we will fund. These are listed in A - D. Please identify the specific change(s). Applicants may propose a project that addresses one or a combination of these. (Typical response is between 200 - 400 words.)
8. How will the activities in your project help you achieve your project goal(s) and the goal(s) of this funding opportunity? How do these activities advance racial and health equity? (Typical response is between 200 - 400 words.)
9. Describe the opportunity, challenges, issues or need for the community(ies) that your proposal addresses. (Typical response is between 200 - 400 words.)
10. How have you engaged the community in the design of this project and related goals? Are there other organizations or groups that will be engaged in the design or implementation of this initiative? (Typical response is between 200 - 400 words.)

11. Who (staff, subcontractors, etc.) will do the work? What qualifications do they have? If you are working with other organizations or coalitions, describe who they are and what role they will play in the project. (Typical response is between 200 - 400 words.)
12. How will you know that your project was successful? (Typical response is between 200 - 400 words.)
13. In addition to the funding, are there any resources you might need to support your project? (For example: communications, evaluation, network building, community engagement, movement building, etc.) (Typical response is between 200 - 400 words.)
14. This is not a requirement, but if you want to provide more explanation on the PSE change(s) you have chosen, please describe here. If you are not responding, please enter "N/A" in the box below. (Typical response is between 100 - 200 words.)
15. Indicate the times (morning, afternoon, evening) when your organization and any key partners are available for site visits during September 19 – 29, 2023.

## SHARED COMMITMENT TO ANTIRACISM

Blue Cross has long been committed to creating healthier communities and working to advance racial and health equity and enhance the vitality of our state. This has been evident through our advocacy efforts for more equitable policies and systems, our investments supporting communities, and as we seek to change the mainstream narrative on health. But we know we are far from perfect.

Health inequities have been caused and reinforced by generations of racism. The impact of systemic racism has taken a damaging toll on the health of our state, and on the physical and mental health and wellbeing of thousands of Minnesotans. Our communities having the opportunity to be healthy and valued in the same way has long been eroded, as privilege and power have created imbalance and inequities. It's on us to fix it. Ignoring it is being complicit. One by one, Blue Cross is addressing the gaps and blind spots within our own organization that have contributed to inequitable structures and systems. We understand that we must act to dismantle racism and make Blue Cross a truly antiracist organization. Our hope is that by submitting a request for our funding streams and partnering with us, you will also share this antiracism goal commitment and desire for justice that guides us in our journey to create a future where everyone has what they need to achieve their best possible health.

## WORKPLAN

**Each applicant must submit a detailed project workplan for the first year of the project.** Please use the workplan template to describe your project goals, strategies, actions, resources, responsible persons, timing, and measures of success. You may add additional pages or revise the number of rows to fit your needs. The workplan template and a workplan example can both be found here:

[www.centerforpreventionmn.com/our-approach/available-funding-2023/](http://www.centerforpreventionmn.com/our-approach/available-funding-2023/)

## BUDGET INFORMATION

The Center expects to fund 6 to 7 projects. Applicants may apply for funding up to \$150,000 per year. Renewal of funding is dependent on demonstrated progress toward goals in the previous year.

**Each applicant must submit a detailed project budget and budget narrative for the first year of the project.** Include the funding support requested from Blue Cross by completing columns A-E on the budget template. Complete columns F and G only if you will be receiving additional funding beyond that from the Center for Prevention. Please refer to the Instructions tab on the template for additional guidance. The budget form template is located here: <https://www.centerforpreventionmn.com/wp-content/uploads/2023/05/Budget-Template.xlsx>

### Eligible use of funds

- Project staff salaries and benefits
- Project costs, including but not limited to planning, activity costs, project-related equipment and supplies, and other project-related direct costs

### Ineligible use of funds

- Assistance for individuals, including scholarships
- Activities for specific religious purposes
- Clinical quality improvement activities
- Biomedical research
- Back payroll taxes
- Capital expenditures, including building purchase, remodeling or furnishing of facilities, and purchasing land unrelated to the purpose of this RFP
- Cessation and/or commercial tobacco treatment for individuals
- Direct healthcare services, including medical, dental, and mental health
- Director and officers' insurance
- Equipment or travel, except as related to project activities
- Endowments, fundraising events or development campaigns
- Initiatives based solely on promoting individual behavior change
- Legal fees, including the cost of litigation or settlements
- Non-project related activities
- Retiring debt or covering deficits
- Payment of services or benefits reimbursable from other source
- State- or Federal-level lobbying



## Requirements Regarding Lobbying

If an applicant's organization proposes to engage in local lobbying for a public policy, the applicant will be required to demonstrate it is legally able to lobby. Applicants who engage in lobbying activities must comply with all applicable federal, state, and local laws, rules, regulations, ordinances, and directives regarding registration and reporting for lobbying activities. This includes, but is not limited to, compliance with Minnesota Statutes chapter 10A, 211A, 211 B. Blue Cross is not a lobbyist principal for the purpose of any project. Blue Cross funding cannot be used to conduct state- or federal-level lobbying, and may not be used to promote or defeat a Ballot Question. These requirements do not apply to sovereign Tribal Nations.

## PROPOSAL

Sections of your application will be scored in the review process. You can view the question points breakdown in the scoring rubric on the website here [www.centerforpreventionmn.com/our-approach/available-funding-2023/](http://www.centerforpreventionmn.com/our-approach/available-funding-2023/).

By submitting this information, you consent to Blue Cross sharing your proposal with its panel of reviewers.

## PROJECT TIMELINE/KEY DATES

- Informational Webinar live and recorded / June 22, 2023, 3:00 p.m. CST
- Letters of Interest Due / June 30, 2023, 1:00 p.m. CST
- Proposals Due / August 7, 2023, 1:00 p.m. CST
- Site Visits / September 19 – 29, 2023
- Notification of funding decisions / Anticipated date: October 6, 2023
- All applicants will be notified regarding the status of their proposal
- Contracts in place and Project work begins / January 1, 2024

## AWARD CRITERIA

This RFP is not an offer to enter into an agreement with any party, but rather a request to receive proposals from entities interested in providing the products or services outlined herein (each such entity referred to as a "Supplier"). Any responses to this RFP, also referred to as a proposal, may be deemed by Blue Cross to be an offer to enter into a definitive relationship with Blue Cross.

Blue Cross, in its sole and absolute discretion, reserves the right to (1) accept or reject any and/or all responses; (2) modify the requirements set forth in this RFP; (3) utilize alternative Suppliers to provide the same or similar products and services; or (4) enter into negotiations with any Supplier(s) for any and/or all of the products or services that are the subject of this RFP.

All organizations that meet eligibility criteria are encouraged to apply. Awards are contingent upon successful negotiation of award amount and funding agreement. Blue Cross terms and conditions will be provided during contracting and are available in advance by written request.

## AWARD NOTIFICATION

We anticipate that all applicants will receive an email by October 6, 2023, notifying them of the status of their proposals.

## APPLICATION CHECKLIST

- Online application
- Project workplan
- Project budget
- Optional: upload organizational racial or health equity/inclusion policy or statement
- Optional: upload letters of support

## QUESTIONS

Please email any questions to [prevention.funding@bluecrossmn.com](mailto:prevention.funding@bluecrossmn.com). Questions and answers will be summarized and shared publicly at link to <https://www.centerforpreventionmn.com/our-approach/available-funding-2023/>

## GLOSSARY OF KEY TERMS

**Commercial tobacco products** – any product tobacco manufacturers and retailers sell that are containing, made, or derived from tobacco that is intended for human consumption, whether chewed, smoked, absorbed, dissolved, inhaled, snorted, sniffed, or ingested by any other means, or any component, part, or accessory of a tobacco product, including, but not limited to, cigarettes, cigars, little cigars; cheroots; stogies; periques; granulated, plug cut, crimp cut, ready rubbed, and other smoking tobacco; snus, snuff; snuff flour; cavendish; plug and twist tobacco; fine cut and other chewing tobacco; shorts; refuse scraps, clippings, cuttings and sweepings of tobacco, and other kinds and forms of tobacco. Tobacco products excludes any tobacco product that has been approved by the United States Food and Drug Administration for sale as a tobacco-cessation product, as a tobacco-dependence product, or for other medical purposes, and is being marketed and sold solely for such an approved purpose.

**Commercial tobacco** is used throughout this RFP and is meant to include e-cigarettes and any other nicotine delivery products.

**Electronic delivery device** – any product containing or delivering nicotine, lobelia, or any other substance, whether natural or synthetic, intended for human consumption that can be used by a person to simulate smoking in the delivery of nicotine or any other substance through inhalation of vapor from the product. Electronic delivery devices include any component part of a product, whether or not marketed or sold separately. Electronic delivery device does not include any product that has been approved or certified by the United States Food and Drug Administration for sale as a tobacco-cessation product, as a tobacco-dependence product, or for other medical purposes, and is marketed and sold for such an approved purpose.

**Flavored product** – any tobacco product, tobacco-related device, electronic delivery device, or nicotine or lobelia delivery product that contains a taste or smell, other than the taste or smell of tobacco that is distinguishable by an ordinary consumer either prior to or during the consumption of the tobacco product, electronic delivery device, or nicotine or lobelia delivery product, including, but not limited to, any taste or smell relating to menthol, mint, wintergreen, chocolate, cocoa, vanilla, honey, fruit or any candy, dessert, alcoholic beverage, herb, or spice. A public statement or claim, whether express or implied, made or disseminated by the manufacturer of a tobacco product, tobacco-related device, electronic delivery device, or nicotine or lobelia delivery product, or by any person authorized or permitted by the manufacturer to make or disseminate public statements concerning such product or device, that the product or device has or produces a taste or smell other than tobacco will constitute presumptive evidence that the product or device is a flavored product.

**Nicotine or lobelia delivery products** – any product manufacturers and retailers sell that are containing or delivering nicotine or lobelia, whether natural or synthetic, intended for human consumption, or any part of such a product, that is not a tobacco product or an electronic delivery device. Nicotine or lobelia delivery product does not include any product that has been approved or otherwise certified for legal sale by the United States Food and Drug Administration for sale as a tobacco-cessation product, as a tobacco-dependence product, or for other medical purposes, and is marketed and sold for such an approved purpose.

**Health equity** – Attainment of the highest level of health for all people. (Healthy People 2030)

**Racial equity as an outcome** – Race no longer determines one’s socioeconomic outcomes; everyone has what they need to thrive regardless of where they live. (Race Forward)

**Racial equity as a process** – Those most impacted by structural racial inequity are meaningfully involved in the creation and implementation of the institutional policies and practices that impact their lives. (Race Forward)

**PSE Change** – The health of a community can be shaped by social norms (how we act), the physical landscape (the things around us), availability of resources (our access to things like quality education, employment, healthy foods), and the economic vitality of neighborhoods. Policy, Systems, and Environmental (PSE) change focuses on making healthy choices more accessible and available in the communities in which we live, work, and play. PSE change can include:

- **Policy change:** This can be formal, such as a city policy prohibiting the sale of menthol and other flavored commercial tobacco, a Tribal Nation adopting a commercial tobacco-free grounds policy; or informal, such as an organizational policy to provide commercial tobacco treatment to their clients.
- **Systems change:** This involves adapting and changing the rules and norms within systems to encourage healthier choices. This change takes time, and it is a continual process designed to meet the needs of those impacted by these systems. An example is integrating the use of NRTs when providing commercial tobacco treatment in a behavioral health system and training all staff in motivational interviewing.
- **Environmental change:** These are changes to the physical, economic, or social environment. Environmental changes increase opportunities for healthy behavior within a community. Examples include community gardens where traditional tobacco is grown; culturally specific signage and messages that are visible where community members live, work and gather.

## RESOURCES

This resource list provides links to data and examples of PSE changes and community interventions that strive to reduce commercial tobacco inequities. This list is not exhaustive, as work is ongoing in Minnesota, across the United States and Indian Country.

- [Regulate Menthol Tobacco Products](#)
- [Why is a menthol ban a health equity issue?](#)
- [Price, Coupons, and Other Price Discounting options](#)
- [Regulate the Location, Density, Number and Type of commercial tobacco retailers](#)
- [Online and Other Delivery Sales of Commercial Tobacco Products – Local Policy Options](#)
- [Smoke-free Tribal Casino resources: Smoke Free Tribal Casinos, Gambling with our Health: Smoke-Free Policy Would Not Reduce Tribal Casino Patronage, and Creating Healthier Policies in Indian Casinos Tribal Report](#)
- [Keep it Sacred National Native Network](#)
- [Behavioral Health and Tobacco Use in Minnesota](#)
- [Traditional Tobacco and American Indian Communities in Minnesota](#)
- [Tobacco and Nicotine Use in Minnesota: Briefs, Reports, and Statistics](#)
- [Health Disparities Related to Commercial Tobacco and Advancing Health Equity](#)
- [Targeted Communities](#)

For additional information about key concepts to advance Racial and Health Equity refer to <https://www.raceforward.org/about/what-is-racial-equity-key-concepts>

## OVERVIEW OF BLUE CROSS AND BLUE SHIELD OF MINNESOTA

### **Confidentiality**

This RFP, and any information supplied by Blue Cross or any of its affiliates in connection with the preparation of a proposal, is confidential. It must not be disclosed, reproduced or used in any way by Supplier except for the sole purpose of responding to this RFP. Likewise, all information Suppliers provide in proposals and during negotiations, if held, will be regarded as confidential. Blue Cross will not disclose your proposal to other bidders at any time without your express written authorization.

### **Code of ethics**

Supplier shall not engage in any conduct that might be construed as improperly influencing the decision of Blue Cross with respect to this RFP. The exchange or offering of any money, gift item, personal service or unusual hospitality by Supplier is prohibited. This prohibition extends to the officers, directors, trustees, employees, agents or immediate family members of either party. Failure to comply with this direction may, at the sole discretion of Blue Cross, disqualify a Supplier from consideration.

### **MWDBE program**

Blue Cross supports Suppliers that meet the criteria of the Minority, Women, Disadvantaged Business Enterprise (“MWDBE”) program as one component of its analysis of Supplier capabilities. This program requires that Suppliers acknowledge it is the policy of Blue Cross to encourage all entities with which it enters into relationships for goods and services to use qualified MWDBE suppliers to the fullest extent consistent with the efficient performance of such contracts.

### **Non-exclusivity**

Nothing in this RFP obligates or commits Blue Cross to enter into an exclusive or preferred relationship with any Supplier.

### **Third party suppliers**

Blue Cross will consider Supplier to be the sole point of contact for all contractual obligations, including charges and payments. Your organization will also act as the responsible party for resolution of all issues pertaining to performance of your organization’s services. Blue Cross reserves the right to reject any third-party subcontractor.