

Department of Finance
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REQUEST FOR PROPOSAL Specification # 5347 Annual Physical Exams and Testing

The City of New Rochelle (City) is issuing this Request for Proposals (RFP) to solicit the services of a licensed physician/facility to perform annual physical examinations including blood/lab work to be provided to the City's Police Department and Fire Department. There are approximately 125 Fire and 19 Police personal who will require services. Additionally, you will be required to provide the Hepatitis "B" vaccination to new recruits.

Currently the Police and Fire personal go to the provider's office for physical exam during work hours as per contractual requirements. The City, in order to reduce staff downtime and overtime situations prefers to contract with a local provider for services. Your proposal shall indicate how you can assist in expediting services to keep staff "out of service" time to a minimum.

The services awarded as a result of this RFP, are anticipated to begin January 1, 2021 and continue for a term of three (3) years, ending December 31, 20, 2023. Upon mutual agreement, this contract can be renewed for additional terms.

Questions regarding this RFP shall be submitted via email to Edward Ritter at eritter@newrochelleny.com no later than **Wednesday, November 4, 2020 at 4:30 pm**; questions received after this time will not be answered. All questions and answers will be compiled anonymously and posted to our web-site by **Tuesday, November 10, 2020**. Interested parties shall log into the City's website to seek updated information, individual notifications will not be made.

www.newrochelleny.com/bids.aspx

To be considered for award your proposal must be submitted in triplicate and include one electronic copy (in PDF format) on a flash drive. Hard copy Proposals must be submitted in a sealed envelope with **SPEC 5347** noted on the outside mailing envelope *no later than 3:00 PM Wednesday, November 18, 2020*

Proposals will not be accepted via email, fax, or after the deadline. It is the responsibility of the Provider to meet the specified deadline and to provide complete information as requested in the RFP. Proposals arriving after the specified deadline, whether sent by mail, courier, or in person will not be accepted. These submittals will remain unopened. Mailed submittals which are delivered after the specified deadline will not be accepted regardless of postmark on the envelope.

The mailing address: City of New Rochelle
Purchasing Dept.
515 North Avenue
New Rochelle, NY 10801

Scope of Work:

The selected Physician/Facility shall provide Physical Services for the City's Police and Firefighters to include:

- Physical Exam
- EKG
- Chest X-Ray
- Spirometry
- Vision test
- Comprehensive panel; CBC, cholesterol profile, RPR and Urinalysis
- RPPD
- Hepatitis B administration & vaccine (not as part of annual physical)

Blood/Lab work is to be done prior to the physical exam so all results are available when the Physical exam is performed.

Proposal Format

Section 1 – Physician/Facility

- Key staff to perform physicals
- Length of professional experience
- Relevant experience
- References and listing of previous clients with contact information

Section 2 – Proposed Fees and Schedule

Provide the cost/fee for the following service. Cost should be per member.

Proposal shall include any and all other costs that may be charged in providing services.

- Fee for Physical per member \$_____
- Lab Fee per member \$_____
- Chest X-Ray (per member) \$_____
- PPD: \$_____
- Urine Cytology \$_____
- Hepatitis B Administration & Vaccine \$_____

Invoicing: The City requests invoicing be done on a monthly basis and shall include the dates and services provided as well as the relevant charge(s).

Section 4 – Insurance Documents

Copy of insurance certificate(s) demonstrating compliance with the City’s insurance requirements (see attached).

Bid Evaluation, Acceptance or Rejection

The selection of the successful bidder will be based on qualifications, expertise, project approach and understanding, fees and availability. Specifically, the City will review and grade all proposals in accordance with the following criteria:

- Qualifications and expertise (Max. 40 points)
- Approach and availability (Max. 40 points)
- Fees (Max. 20 points)

The City of New Rochelle reserves the right to reject any or all proposals and to negotiate with any bidder.

Liability Requirements

The successful physician/facility shall supply and maintain insurance which defends, indemnifies and holds harmless the City of New Rochelle, its officers, employees and agents from and against any and all liability, damage claims, demands, costs, judgments, fees, attorney’s fees or loss arising directly out of acts or omissions hereunder by the contractor or third party under the direction or control of the contractor. The successful bidder must furnish the City with **Certificate of Insurance and Endorsement** prior to commencement of work. The required coverage shall not be less than the following:

Workers Compensation	Statutory Requirements
NY State Disability	Statutory Requirements
General Liability	\$2,000,000
Automobile Liability	\$1,000,000
“Contractual Liability”	Must be printed on Certificate
Errors and Omissions	\$1,000,000

INSURANCE CERTIFICATES SHALL NAME THE CITY OF NEW ROCHELLE AS ADDITIONAL INSURED PARTY AND SHALL STATE THAT ALL COVERAGE SHALL BE PRIMARY TO ANY OTHER INSURANCE COVERAGE HELD BY THE CITY.

“The City of New Rochelle is named as an additional insured party for all general and excess liability coverage based on the contractual liability of the named insured. Such general and excess liability coverage shall be primary to any other coverage carried by the City of New Rochelle with respects to acts or omissions of the named insured.”

It is intended by the parties hereto that the general and excess liability insurance provided by the contractor shall be primary to any other coverage carried by the City of New Rochelle with respect to liability coverage arising out of any act or omissions by the contractor. The City of New Rochelle will be named as an additional insured. Nothing contained herein shall be construed as making said general and excess liability insurance primary insurance for acts or omissions of the City of New Rochelle.

New York Law and Venue. This contract shall be construed under the laws of the State of New York. All claims, actions, proceedings, and lawsuits brought in connection with, arising out of, related to, or seeking enforcement of this contract shall be brought in the Supreme Court of the State of New York, Westchester County.

In addition, all City contractors not incorporated in the State of New York shall produce a **Certificate to Do Business in the State of New York from the New York Secretary of State** prior to executing their contract with the City.

Cancellation

Any violation of the terms, conditions, requirements and/or non-performance of the agreement resulting from this RFP shall result in immediate cancellation. The agreement may be canceled by the City for any other reason(s) upon 10 days written notice.

The following Exhibit A must be completed and returned with your proposal response.

All terms, conditions and requirements as set forth in this Request for Proposal are acceptable as specified therein. Yes _____ No _____

If “NO”, please provide a detailed description and/or explanation of any deviation in your proposal from the specification detailed in the Request for Proposal with your proposal response.

By submission of this proposal, each bidder, and each person signing on behalf of any bidder, and in the case of a joint bid, each party thereto as to its own organization, under penalty of perjury, certifies to the best of its knowledge and belief:

- A. The prices in this proposal have been arrived at independently without collusion, consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder of any competitor; and
- B. Unless otherwise required by law, the prices which have been quoted in this proposal have not been knowingly disclosed by the bidder prior to the opening, directly or indirectly, to any other bidder or to any competitor; and
- C. No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

The bidder certifies that this proposal is made without any connection with any other person making a proposal for the same purpose, and is in all respects fair and without collusion or fraud, and that no elected official or other officer or employee or person whose salary is payable in whole or in part from the City of New Rochelle treasury is directly or indirectly interested therein, or in any portion of the profits thereof.

As an authorized representative of the identified company, I accept all the terms and conditions identified in Request for Proposal Spec. #5347 except as identified.

Company Name and Address _____

Signature of Authorized Representative

Date

Name and Title

Phone Number

Email Address

Fax Number