

**TOWN OF MANCHESTER
GENERAL SERVICES DEPARTMENT
494 MAIN STREET - PO BOX 191
MANCHESTER, CONNECTICUT 06045-0191
(860) 647-3031
FAX (860) 647-5206**

REQUEST FOR PROPOSAL NO. 20/21-19

EMPLOYEE HEALTH PHYSICIAN SERVICES

PROPOSALS DUE: SEPTEMBER 15, 2020 @ 4:00 P.M.

TOWN OF MANCHESTER
REQUEST FOR PROPOSAL
FOR EMPLOYEE HEALTH PHYSICIAN SERVICES

1.0 INTENT

The Town of Manchester heretofore referred to as the Town, is soliciting proposals from qualified respondents to serve as the Town of Manchester Employee Health Physician.

2.0 SPECIAL CONDITIONS

License to practice medicine - Respondent shall possess a current license to practice medicine in the State of Connecticut, and have experience in the field of Occupational Medicine, Board Certified physicians are preferred. Respondent shall provide copies of such license to the Health Department annually during the contract period.

3.0 PROFESSIONAL SERVICES LIABILITY INSURANCE

The Employee Health Care Physician shall maintain, and assume the cost for professional liability insurance (malpractice) of at least two million dollars covering all services provided under this agreement.

A copy of the current liability insurance (malpractice) must be provided to the Health Department annually during the contract period.

4.0 CONTRACT TERM

The initial term of the contract will be three (3) years from date of award with option for renewal for up to two (2) additional years. The renewal would be by mutual consent of the Town and selected Respondent at the same prices, terms and conditions.

5.0 SCOPE OF SERVICE

The Employee Health Physician shall provide the following consultation, clinical and clinical supervision services for the Town Employee Health Program. Estimated hours are approximately 100 per year. Specific duties of the Employee Health Physician and/or his/her designee shall include:

5.1 Provide pre-employment physical examinations and medical testing at the Respondent's facility, as directed by Town policy that includes but is not limited to the list of tests in Appendix I.

5.2 Consult with the Town of Manchester Health Department on medical and physical criteria for employment of all Town staff, especially uniformed services, heavy laborers, and employee physical examinations conducted by other health care providers.

- 5.3 Upon request, review potential disability cases and advise the Town regarding nature and duration of injury, functional abilities of employee, prognosis, and recommendations for monitoring or conducting further medical studies. The goal is to limit losses under self-insurance and prevent premature return to work.
- 5.4 Represent the Town as needed in potential disability appeal proceedings, Pension Board hearings, grievance hearings, or court cases.
- 5.5 Upon request, review cases of extended illness or absence from work, advise the Town regarding the expected duration of absence, functional abilities of the employee upon return to work and recommendations for further monitoring or medical studies. The goal is to control premature return to work and inappropriate absences.
- 5.6 Upon request, review cases pending before the Town Pension Board regarding disability pensions, advise the Town regarding functional abilities of the person, and make recommendations for further medical studies. The goal is to determine whether the person is eligible for a disability pension.
- 5.7 Upon request, review cases in which work performance of an employee may be seriously affected by the employee's medical or physical condition, advise the Town regarding functional abilities of the employee and the extent to which the conditions affect work performance, and recommend appropriate interventions to ameliorate the impact on work performance.

6.0 RESPONSIBILITIES OF THE TOWN

- 6.1 Reimburse Respondent for services rendered consistent with fee schedule.
- 6.2 Provide relevant documentation pertaining to each case for decision making purposes consistent with HIPPA guidelines.
- 6.3 Execute a written contract with the Respondent awarded the request for proposal.

7.0 PROPOSALS

Respondents shall provide a comprehensive written proposal to the Town of Manchester that will address the following areas:

- 7.1 **Qualifications and Experience:** Provide a detailed written summary to the Respondent's qualifications and experience in providing services articulated in Section 5.0 – 5.7. Services currently provided to municipalities should be highlighted. Include references from clients for whom you have provided similar services.
- 7.2 **Staff Plan:** Identification of all staff who will provide any portion of the services required under the contract. For each identified individual, provide information on their educational background, medical expertise and health care consultant experience. Please provide resumes of all key personnel. Any changes in key personnel must be reported to the Health Department as soon as possible and copies of current licenses of those personnel must be provided.
- 7.3 **Service Delivery Plan:** Describe how and where services required herein will be provided to the Town, and describe how the service delivery plan will ensure timely delivery of services.
- 7.4 **Services Expected of the Town:** Define the nature and scope of all services expected to be provided by the Town.
- 7.5 **Fee Proposal:** All Respondents are required to submit a fee proposal for all services outlined in Scope of Services, Section 5.0 through 5.7 including Appendix I. All services must be included in this fee proposal. Prices shall be firm and for the contract term. The Town of Manchester is exempt from the payment of excise taxes, transportation, and sales taxes imposed by the Federal Government and /or the State of Connecticut.

The Town reserves the right to negotiate fees and payment schedules with the selected Respondent.

- 7.6 **Exceptions and Alternatives:** Respondents wishing to take exceptions to any requirement in the RFP shall state and explain such exceptions. The Town may accept proposals which take exception to any requirements in this RFP, or which offer any alternative to a requirement herein. Any exception or alternative must be clearly delineated and cannot materially affect the substance of this Request for Proposal.

7.7 The Town will not be liable for any costs incurred in the preparation of the response for this Request for Proposal. All proposal submissions and materials become property of the Town and will not be returned.

Respondents to this RFP are hereby notified that all proposals submitted and information contained therein and attached thereto shall be subject to disclosure under the Freedom of Information Act.

8.0 SUBMISSION DEADLINE

All proposals must be received by **4:00 p.m. September 15, 2020**. Five (5) copies of the proposal shall be submitted in a sealed envelope clearly marked “RFP Physician Services Proposal”. Proposals shall be submitted to:

Hand Delivery

Town of Manchester
Maureen Goulet
Director of Purchasing
494 Main Street
Manchester, CT 06040

U.S. Postal Mail Delivery

Town of Manchester
Maureen Goulet
Director of Purchasing
P.O. Box 191
Manchester, CT 06045-0191

All proposals shall be opened publicly and recorded as received. There will be no public reading of Proposals. Proposals received later than time and date specified will not be considered. All proposals shall remain firm and cannot be withdrawn for a period of 90 days after receipt of proposals.

Respondents to this RFP are hereby notified that all proposals submitted and information contained therein and attached thereto shall be subject to disclosure under the Freedom of Information Act after award decision has been made.

9.0 QUESTIONS AND INQUIRIES

Each Respondent is presumed to have read and is thoroughly familiar with all the contract documents for this RFP. Failure or omission of the Respondent to receive or examine any information shall in no way relieve any Respondent from obligation with respect to their proposal.

Questions about this RFP may be directed to Maureen Goulet, Director of Purchasing, by email gensvcs@manchesterct.gov or fax (860) 647-5206 or no later than 5 days prior to the date proposals are due. All information given by the Town except by written addenda shall be informal and shall not be binding upon the Town nor shall it furnish a basis for legal action by any Proposer or prospective Proposer against the Town.

Answers to these questions will be addressed in an addendum which will be issued on the Town of Manchester Web site at <http://generalservices1.townofmanchester.org/index.cfm/bids/>. **It shall be the responsibility of the bidder to download this information. THE TOWN OF MANCHESTER WILL NOT MAIL A SEPARATE HARD COPY OF ADDENDUM TO BIDDERS.** No addendum will be issued less than 2 (two) calendar days before the scheduled bid opening unless it is to postpone the bid.

10.0 PROPOSAL EVALUATION

Selection criteria:

The following criteria will be used, without limitation, in determining the successful Provider:

- 10.1 The background experience of the Respondent in providing similar services elsewhere, including the level of experience in working with municipalities and /or other government bodies of similar size, and the quality of services performed, either for the Town or for other municipal or private sector clients.
- 10.2 The specific background, education, and qualifications, and relevant experience of the individuals designated to provide services, especially those of the program manager and site coordinator, and documentation of relevant and pertinent training and accreditations of each.
- 10.3 Commitment to a service delivery plan that is timely and effective and that is consistent with established medical and public health practice and is responsive to the Town's timetable.
- 10.4 Assessment of the Respondent's ability to develop and maintain a positive working relationship with Town staff and ability and willingness to actively communicate with same.
- 10.5 Competitiveness of proposed fee, although the Town is not bound to select the respondent who proposes the lowest fees for services. The Town reserves the right to negotiate fees with the selected respondent.
- 10.6 The Respondent's responsiveness and compliance with the RFP requirements and conditions.
- 10.7 A review of references from other clients as provided in the Proposal submitted.

11.0 SELECTION PROCESS

- 11.1 Proposals will be evaluated based upon the criteria and/or factors of evaluation listed in the Request for Proposal.
- 11.2 The Town reserves the right to short list the proposals received and arrange for interviews as part of the selection process.
- 11.3 The Town of Manchester shall select that responsible and responsive Respondent whose proposal is determined by the Town to be the best suited, most advantageous, and provides the greatest overall benefit to the Town on the basis of the criteria and /or factors of evaluation listed. The Town expressly reserves the right to negotiate with the selected Respondent prior to an award of any contract pursuant to this Request for Proposal.
- 11.4 The Town reserves the right to reject any and all proposals and to waive any informalities or technical defects in any proposal. Non-selection of any proposal will mean that another acceptable proposal was deemed to be more advantageous to the Town of Manchester or that no proposal was accepted. Respondents whose proposals are not accepted will be so notified. Notification of non-selected proposals will be devoid of any criticism of the proposal and of any implication that the proposal or proposed equipment was deficient.

12.0 MANCHESTER LIVING WAGE ORDINANCE

This RFP is subject to the provisions of the Town of Manchester Living Wage Ordinance. A summary description of the ordinance and the certification form is attached. Contractors are asked to indicate on the attached Certification Form if your firm would be considered a covered employer. The Certification Form shall be returned to the Town with the proposal.

13.0 GENERAL PROVISIONS

- 13.1 The Town of Manchester is an equal opportunity employer, and requires an affirmative action policy for all of its Contractors and Vendors as a condition of doing business with the Town, as per Federal Order 11246. By submitting a Proposal for this Request for Proposal, all vendors and contractors agree to this condition of doing business with the Town and should the Town choose to audit their compliance, the vendor agrees to cooperate fully.
- 13.2 Any act or acts of misrepresentation or collusion shall be a basis for disqualification of any proposal or proposals submitted by such persons guilty of said misrepresentation or collusion. In the event that the Town enters into a contract with any bidder who is guilty of misrepresentation or collusion and such conduct is discovered after the execution of said contract, the Town may cancel said contract without incurring liability, penalty or damages.

- 13.3 All deliveries of commodities or services hereunder shall comply in every respect with all applicable laws of the Federal Government and/or the State of Connecticut. Purchases made by the Town of Manchester are exempt from payment of Federal Excise Taxes and the Connecticut Sales Tax and such taxes must not be included in bid prices. Federal Excise Tax exemption certificates, if requested, will be furnished.
- 13.4 The Town reserves the right to reject any and all proposals, to waive any informalities or technical defects in any proposal or discontinue this process at any time and to negotiate fees and final scope of service with selected firm. Non selection of any proposal will mean that another acceptable proposal was deemed to be more advantageous to the Town of Manchester or that no proposal was accepted.
- 13.5 The Town will not be liable for any costs incurred in the preparation of the response for this Request for Proposal. All proposal submissions and materials become property of the Town and will not be returned. Respondents to this RFP are hereby notified that all proposals submitted and information contained therein and attached thereto shall be subject to disclosure under the Freedom of Information Act after evaluation and award decisions have been made.
- 13.6 These specifications in their entirety are the property of the Town of Manchester. The Proposer shall not copy or disseminate any portion of these specifications without express written authorization from the Town of Manchester, except as necessary in the preparation of a proposal. Any authorized copies of these specifications or portions thereof shall include a similar paragraph prohibiting further copying or dissemination.
- 13.7 Assignment by the successful respondent to a third party of any contract based on the Request for Proposal or any monies due is prohibited and will not be recognized by the Town of Manchester unless approved by the Town in writing.

Summary Description for Vendors Regarding Manchester's Living Wage Ordinance

Effective February 1, 2010, the Town of Manchester adopted a living wage ordinance. This Summary Description is designed to provide any vendor bidding on a Town of Manchester contract with the key provisions of that ordinance. It does not contain the full ordinance.

LIVING WAGE REQUIREMENT:

The ordinance requires that companies awarded service contracts by the Town of Manchester exceeding \$25,000 in any one fiscal year pay their **Eligible Employees** a **living wage**. Companies considered **Covered Employers** subject to this requirement are defined below. The Town of Manchester has determined that the contract resulting from this bid or Request for Proposals will be subject to the ordinance if the total contract value is \$25,000 or more in any one fiscal year.

The living wage is currently calculated to be \$13.88/hour for employees that are provided comprehensive health care benefits, or \$17.87/hour for employees that are not provided comprehensive health care benefits.

The living wage and health benefit requirements are adjusted annually each July, effective July 1, 2010. Companies will be required to pay the applicable living wage rate in effect during the term of their contracts.

COVERED EMPLOYERS AND EXEMPTIONS:

The ordinance requires that Covered Employers pay the living wage rate. Certain employers are excluded from paying the living wage rate. They are as follows:

- Non-profit organizations as defined by the ordinance, and
- Entities that employ less than 25 eligible employees.

ELIGIBLE EMPLOYEES:

Eligible employees are **all permanent, full time employees** of the company (defined as a normal work week of at least 30 hours), working in the State of Connecticut, **not just those working on the Town contract.** The following are not considered eligible employees for the purposes of the living wage requirement:

- Employees with a normal work week of less than 30 hours.
- Seasonal or temporary employees.
- Employees under the age of 18.

- Employees hired as part of a school-to-work program.
- Students who serves in a work-study program or as an intern.
- Trainees participating for not more than six months in a training program.
- Employees enrolled in a governmentally funded vocational rehabilitation program.
- Volunteers working without pay.
- Employees exempted under Section 14(c) of the Fair Labor Standards Act due to disabilities.
- Any person whose wage rate is subject to a federal or State of Connecticut statute or regulation mandating a prevailing wage rate.

EMPLOYER OBLIGATIONS:

Covered Employers are required to do the following pursuant to the ordinance.

- Certify with the submission of their bid or proposal a) that they will pay the required living wage to eligible employees if awarded a contract, or b) that they are exempt from requirements of the ordinance,
- Upon award, covered employers shall provide the Town a sworn affidavit affirming that all eligible employees of the covered employer working in the State of Connecticut are receiving the living wage and health benefits required by this ordinance.
- This sworn affidavit shall be provided thereafter on an annual basis within 30 days of a request being made by the Town if the duration of the contract exceeds one (1) year.
- Notify their employees of their rights under the Living Wage Ordinance by posting a copy of the ordinance and other materials prepared by the Town of Manchester in locations where employees will see them.
- Make best efforts to attempt to hire residents of the Town of Manchester for all new positions which result from a service contract subject to the ordinance.

PROHIBITED PRACTICES:

- Covered Employers cannot decrease non-wage benefits (such as insurance, vacation, or pension) as a means of complying with the living wage requirements.
- Covered Employers cannot retaliate or discriminate against any employee for making a complaint against the covered employer regarding compliance with living wage requirements.

ENFORCEMENT:

The Town may enforce the provisions of this ordinance by the imposition of fines, suspension of contract or declaring the Covered Employer ineligible for future contracts.

WAIVERS:

The ordinance provides for the waiver of certain requirements in the ordinance. However, no waivers will be considered until the bidding process has been completed and a contract has been awarded. Requests for waivers must be made by the Covered Employer, in writing, to the General Manager. The General Manager shall submit the waiver request to the Board of Directors, which shall have the sole discretion as to whether it is granted.

The above is intended to be a summary of the requirements of the living wage ordinance as they affect covered employers and is provided for informational purposes only. Employers should read the entire Living Wage Ordinance. It can be found online at www.townofmanchester.org on the left side of the page. Click on Document Center, scroll to General Services and click on Living Wage Ordinance.

**TOWN OF MANCHESTER
LIVING WAGE CERTIFICATION FORM**

The Town of Manchester has determined that this contract may be subject to the provisions of the Manchester Living Wage Ordinance, Chapter 212 of the Manchester Code of Ordinances, Sections 212-1 through 212-11.

Bidders are required to indicate whether they are a Covered Employer as defined by the Manchester Living Wage Ordinance or are exempt from the requirements by marking the appropriate section below. **FAILURE TO INDICATE MAY RESULT IN THE REJECTION OF YOUR BID.**

_____ I/We are a covered employer and shall pay the required living wage to eligible employees and comply with the requirements of the ordinance during the term of the contract.

Or that:

_____ I/We are not a Covered Employer and therefore not subject to Manchester's Living Wage Ordinance for the reason indicated below:

_____ Charitable foundations, charitable trusts or nonprofit agencies or nonprofit corporations provided that the foundation, trust or nonprofit agency or corporation is exempt from federal income taxation and may accept charitable contributions under Section 501 of the Internal Revenue Code of 1986, or any subsequent corresponding internal revenue code of the United States, as from time to time amended.

_____ Bidder employs less than twenty five (25) eligible employees.

_____ Annual contract value is less than \$25,000.

I, _____ of _____ do hereby certify
Officer, Owner, Authorized Rep. Company Name

that the representations made above are accurate for _____ :
Bid Name or RFP Name

Signed by: _____ Dated: _____

TO BE RETURNED WITH BID OR RFP SUBMISSION.

APPENDIX I

TOWN OF MANCHESTER
PRE-EMPLOYMENT PHYSICAL EXAMINATIONS CRITERIA
AND EMPLOYEE MEDICAL TESTING/CLEARANCE EXAMINATION CRITERIA
FY 2020/2021

It is expected that between twenty-five (25) and thirty (30) pre-employment physicals shall be performed during each year of the contract. This is an estimate only.

I. CATEGORY: PRE-EMPLOYMENT PHYSICALS:

General Employee:

Services:

NON-NIDA urine collection and drug screen

Heavy Laborer:

Services:

Physical examination

Urinalysis (dip stick)

Audiometric examination (not whisper test)

NIDA urine drug screen collection

Serology - SMAC (or comparable blood work), HDL, cholesterol profile

Additional services if indicated:

PFT + written clearance to use respiratory equipment

PPD

Td, Tdap (if indicated)

chest x-ray (two views)

EKG

Copy of audiogram with interpretation for heavy laborers shall be forwarded to the Manchester Health Department for inclusion in the employee health record.

II. CATEGORY: POLICE AND FIRE CANDIDATES PRE-EMPLOYMENT PHYSICAL EXAMINATION

Services: NON-NIDA urine collection & drug test

Pulmonary function test

Chest x-ray (two views)

Serology – SMAC (or comparable blood work), CBC, TSH, thyroid profile, lipid group,

Audiometric testing

Vision screening (distance, near vision, and color vision) or review written documentation from eye doctor.

Medical clearance to use respiratory equipment

(EKG/Stress test to be done by outside Cardiologist under Town contract)

Additional services if indicated:

PPD

Td, Tdap (if indicated)

Written documentation re: medical clearance to use respiratory equipment, copy of audiogram with interpretation, and date/results of PPD and any immunizations administered as part of the pre-employment physical examination to be forwarded to the Manchester Health Department for inclusion in the employee's health record.

III. CATEGORY: CROSSING GUARD CANDIDATE

Services: Physical examination

Vision screen (Visual acuity should be no greater than 20/50 combined with or without correction).

Audiometric test (Hearing deficit in pure tone thresholds in *at least one* unaided ear shall be no greater than 35 decibels in three of the four frequencies - 500, 1000, 2000, 3000 Htz. If they wear a hearing aid, they must see an audiologist for testing and have the results sent to the Hartford Medical Group).

Urinalysis

Hematocrit

Cognitive ability, Coordination skills, and motor skills evaluation

Additional tests as determined by examining medical professional

Additional services if indicated:

PPD

Td

Written documentation of above examination and testing results must be provided to the Health Department.

IV. CATEGORY: ANNUAL TUBERCULIN SKIN TEST FOR POLICE AND FIRE PERSONNEL

Services: Administer PPD (approx. 150 - 160 individuals) on site

Read PPD in 48 - 72 hours (on site) by qualified medical professional

Individual copies of complete reports shall be submitted to the Health Department for individual employee health records.

V. CATEGORY: HEARING CONSERVATION PROGRAM

Services: Annual audiogram plus written interpretation

Medical history

Individual copies of complete report shall be submitted to the Health Department for employee health record

VI. CATEGORY: RESPIRATORY CLEARANCE PROGRAM

Services: Review/assessment of completed OSHA respiratory questionnaire for indications of further evaluation
Pulmonary function test as indicated
Medical history
Assessment of heart & lungs as indicated per OSHA
Written clearance to use respiratory equipment for each employee shall be submitted to the Health Department

VII. CATEGORY: RABIES VACCINATIONS

Service: Administer initial rabies vaccine series (approx. 2-4 individuals annually)
Administer rabies vaccine booster as recommended
Complete report shall be submitted to the Health Department regarding individual employee vaccination dates for employee record.

VIII. CATEGORY: HEPATITIS B VACCINATIONS

Service: Administer hepatitis B vaccine series to employees who fall under the Town's Bloodborne Pathogen Policy.
Complete report shall be submitted to the Health Department stating vaccination dates for employee health record.