REQUEST FOR QUALIFICATIONS (RFQ)

RFQ Description: Off-site Health and Wellness Services for the City of Lawrence, Kansas

Department: City Manager's Office/Human Resources Division

Contacts: Ryann Pem, Recruiter
Email: rpem@ci.lawrence.ks.us
Phone: (785) 832-3209

Copy Requirements: Submit five (5) copies of qualifications plus one electronic copy in PDF format

Due Date & Time: Tuesday, November 16, 2010 at 4:00 p.m. CST

Submit to Address: Ryann Pem, Recruiter
City of Lawrence
6 East 6th Street
P.O. Box 708
Lawrence, KS 66044
E-mail: Rpem@ci.lawrence.ks.us
Description
This Request for Qualifications (RFQ) is being released by the City of Lawrence, Kansas to solicit interest and credentials from qualified companies to provide off-site health and wellness clinic services for employees and retirees of the City of Lawrence, Kansas.

Services Requested
The selected company will provide off-site health and wellness clinic services to the City of Lawrence, Kansas. All respondents must be able to meet and/or exceed all of the requirements listed in the Scope of Work. Any respondent who is not able to meet the Scope of Work and/or fails to include any of the information requested may be determined non-responsive.

Scope of Work
The City of Lawrence, Kansas is seeking proposals from qualified companies to provide health and wellness services beginning around January 1, 2011 as described in this request. The company will provide off-site health and wellness clinic services for City of Lawrence employees plus retirees. At this time, services will not be offered to spouses and dependents, but the City of Lawrence, Kansas may decide to extend them in the future. The qualified company must be able to provide the following requirements.

Required Services
- A clinic that focuses primarily on providing wellness services. Secondary focus is to have the ability to provide minor medical care and treatment, and is authorized to write prescriptions.
- The services will need to be provided in a location convenient to City of Lawrence employees. Clinic cannot be housed in a City of Lawrence facility.
- The ability to park at least 2 large vehicles (i.e. dump trucks, fire trucks) is required.
- A clinic with 2 fully equipped exam rooms, a private reception area, and an entrance that is respectful of patient confidentiality.
- Physician’s Assistant preferred. Nurse Practitioner will be considered.
- Confirmation that such clinic will be open and accessible to City of Lawrence Employees and Retirees for at least 20 hours Per Week.
- Ability to provide exclusive scheduling for services for City of Lawrence employees and retirees (City of Lawrence employees and retirees should be able to have priority when visiting the clinic).
- HIPAA compliant reporting and recordkeeping capabilities to include:
  - Trend reporting on the biometrics such as: High Blood Pressure, Cholesterol, and Weight;
  - Participation data for incentive programs.
- Ability to allow unique branding for the clinic (City of Lawrence wellness logo should be able to be displayed and used in conjunction with clinic name).
- Ability to deliver and provide Health Risk Assessment (HRA) reporting and services.
- Ability to provide well care counseling both during clinic visits and when conducting follow-up well counseling for employees and retirees based on HRA results.
- Program materials for health and wellness programming.
- Ability to conduct flu shots, biometric clinics, and offer educational programming or screenings at designated city locations.
**Submittal Components**

Each response must contain a detailed description of costs, benefits and services and provide complete answers to the questions and requests listed below. At a minimum, the services outlined in this request must be available. Should your company be interested in being considered, please submit your company’s qualifications addressing the following items.

- Statement that you are able to meet all requirements listed above in Scope of Services.
- Summary of the program that is being offered by your company.
- General estimate of implementation and annual ongoing fees associated with the wellness clinic.
- Proposed location of wellness clinic (address, phone, etc.).
- Experience in:
  - Healthcare delivery in clinic setting with demonstrated HIPAA compliant record keeping. Wellness clinic experience preferred.
  - Developing branding for Wellness programming.
  - Developing and providing reports based on Health Risk Assessments and clinic usage.
- Software used and types of reporting provided. Reports should be based on Health Risk Assessments (HRA’s) and clinic usage.
- Project team/personnel including:
  - Identification of person who will be responsible and in charge of the work.
  - Previous experience and work history.
  - Current and projected workload and availability of project team members.
- References
  - At least 3 references of current clients
  - 1 client that no longer does business with your company.
- Other Pertinent Information.

**Project Funding**

This project will be financed through use of the City Health Care Fund.

**Timetable**

<table>
<thead>
<tr>
<th>Task</th>
<th>Dates</th>
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<tbody>
<tr>
<td>RFQ Released</td>
<td>10/27/2010</td>
</tr>
<tr>
<td>Letter of Intent and Questions Due</td>
<td>11/03/2010</td>
</tr>
<tr>
<td>City of Lawrence will send responses to Letters of Intent and Questions</td>
<td>11/09/2010</td>
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<tr>
<td>RFQ’s Due at 4:00 p.m. CST</td>
<td>11/16/2010</td>
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<tr>
<td>City of Lawrence will evaluate RFQ’s</td>
<td>11/22/2010-12/23/2010</td>
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<td>Finalist Interviews</td>
<td>11/29/2010-12/02/2010</td>
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<tr>
<td>The selected finalist will be notified (pending City Commission Approval)</td>
<td>12/14/2010</td>
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Selection
Qualifications received will be reviewed and evaluated on the items described above. The most responsive/qualified company will be selected. The Selection Committee will review the qualifications of the companies and select one with which to begin negotiating an agreement. (Note: The Selection Committee may desire to obtain additional information from the interested companies by personal or telephone interviews.) A final scope of services and fee will be negotiated with the selected company. The selection committee will consist of the Human Resources Manager, Assistant City Manager, and Recruiter. A final scope of services and fees will be reviewed and approved by the City Commission.

Those companies not selected will be notified by letter or email upon City Commission approval of selection.

Selection Criteria
Proposals from respondents will be evaluated in part based on the City of Lawrence's rating of your answers to Scope of Work and Submittal Components. Areas of value will include:

- Cost-effective proposal.
- Ability to provide an off-site facility for the health and wellness clinic.
- Ability to meet the City of Lawrence's administrative, service, reporting and contractual requirements.
- Program Management.

The contractor agrees that the contractor shall observe the provisions of the Kansas Act Against Discrimination and shall not discriminate against any person in the performance of work under the present contract because of race, religion, color, sex, disability, national origin or ancestry. The contractor shall in all solicitations or advertisements for employees include the phrase, “equal opportunity employer.” The contractor agrees that if the contractor fails to comply with the manner in which the contractor reports to the Kansas Human Rights Commission in accordance with the provisions of K.S.A. 44-1031 and amendments thereto, the contractor shall be deemed to have breached the present contract and it may be canceled, terminated or suspended, in whole or in part, by the City. If the contractor is found guilty of a violation of the Kansas Act Against Discrimination under a decision or order of the Commission which has become final, the contractor shall be deemed to have breached the present contract and it may be canceled, terminated or suspended, in whole or in part, by the City.
Intent To Respond

Please e-mail your intent to respond (this form) to this Request for Qualifications to: Rpem@ci.lawrence ks.us

Complete this form and return to Ryann Pem at Rpem@ci.lawrence ks.us no later than Thursday, October 28, 2010.

(Insert Company Name) has received the invitation to respond to the City of Lawrence Request for Qualifications and has the following intentions:

☐ We intend to submit an RFQ response and request supplemental data issued be provided electronically to the following e-mail address:____________________________

☐ We decline to provide a response at this time
(Please list your reasons)

Authorized agent: ________________________

Date: ________________________________