



Department of Health

Request for Proposals

RFP# 20050

New York State Physician Profile

Issued: February 8, 2022

DESIGNATED CONTACT:

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TABLE OF CONTENTS

(Hyperlinked; click to go directly to desired topic.)

TABLE OF CONTENTS	3
1.0 CALENDAR OF EVENTS	4
2.0 OVERVIEW	4
2.1 Introductory Background.....	4
2.2 Important Information	5
2.3 Term of the Agreement.....	6
3.0 BIDDERS QUALIFICATIONS TO PROPOSE.....	6
3.1 Minimum Qualifications.....	6
4.0 SCOPE OF WORK	6
4.1 Tasks/Deliverables.....	7
4.2 Security.....	15
4.3 Takeover and Turnover.....	16
4.4 Additional Requirements	18
5.0 ADMINISTRATIVE INFORMATION.....	20
5.1 Restricted Period	20
5.2 Questions	20
5.3 Right to Modify RFP	20
5.4 Payment.....	21
5.5 Minority & Woman-Owned Business Enterprise Requirements.....	22
5.6 Equal Employment Opportunity (EEO) Reporting.....	23
5.7 Sales and Compensating Use Tax Certification (Tax Law, § 5-a).....	24
5.8 Contract Insurance Requirements	24
5.9 Subcontracting	25
5.10 DOH's Reserved Rights.....	25
5.11 Freedom of Information Law ("FOIL")	26
5.12 Lobbying	26
5.13 State Finance Law Consultant Disclosure Provisions.....	27
5.14 Debriefing.....	27
5.15 Protest Procedures	27
5.16 Iran Divestment Act.....	28
5.17 Piggybacking.....	28
5.18 Encouraging Use of New York Businesses in Contract Performance.....	28
5.19 Diversity Practices Questionnaire.....	28
5.20 Participation Opportunities for NYS Certified Service-Disabled Veteran-Owned Businesses ..	29
5.21 Intellectual Property.....	29
5.22 Vendor Assurance of No Conflict of Interest or Detrimental Effect.....	29
5.23 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination.....	29
6.0 PROPOSAL CONTENT.....	30
6.1 Administrative Proposal	30
6.2 Technical Proposal.....	32
6.3 Cost Proposal	34
7.0 PROPOSAL SUBMISSION.....	34
7.1 No Bid Form.....	35
8.0 METHOD OF AWARD.....	35
8.1 General Information.....	35
8.2 Submission Review.....	36
8.3 Technical Evaluation (60%).....	36
8.4 Cost Evaluation (40%).....	36
8.5 Composite Score.....	37
8.6 Reference Checks	37
8.7 Best and Final Offers.....	37
8.8 Award Recommendation.....	37
9.0 ATTACHMENTS.....	38

1.0 CALENDAR OF EVENTS

RFP #20050 – NEW YORK STATE PHYSICIAN PROFILE	
<u>EVENT</u>	<u>DATE</u>
Issuance of Request for Proposals	February 8, 2022
Deadline for Submission of Written Questions	Questions Due By February 25, 2022 at 5:00 p.m. EST
Responses to Written Questions Posted	Responses Posted On or About March 15, 2022
Deadline for Submission of Proposals	Proposals Due On Or Before April 15, 2022 at 4:00 p.m. EST
<i>Anticipated</i> Contract Start Date	November 1, 2022

2.0 OVERVIEW

Through this Request for Proposals (“RFP”), the New York State (“State”) Department of Health (“DOH”) is seeking competitive proposals from qualified bidders to provide services as further detailed in [Section 4.0 \(Scope of Work\)](#). It is the Department’s intent to award one (1) contract from this procurement.

2.1 Introductory Background

The Office of Professional Medical Conduct (OPMC) in the New York State Department of Health seeks a contractor to operate, maintain and enhance the New York State Physician Profile.

The Patient Health Information and Quality Improvement Act of 2000 was signed into law in the fall of 2000 (hereafter referred to as "The Act"). The purpose of The Act in creating a statewide health information system is to improve the quality of health care and increase public information about health care providers, practitioners and plans. The Act calls for the creation of a statewide health information system designed to collect a wide range of data on health care providers, practitioners and plans to make such information, including physician profiles, available to the public on an ongoing basis.

Public Health Law section 2995-a. requires physicians to update their profile information within six months prior to the expiration date of such physician’s registration period, as a condition of registration renewal under the State Education Law. Additionally, each physician licensed and registered to practice in New York State shall, within 30 days of the transmittal of an initial profile survey, and upon entering or updating their profile information, register and maintain an account with the Department’s Health Commerce System, (HCS) (or any successor electronic system), or provide an email address to the Department. Except for optional information provided, physicians shall notify the Department of any change in the Profile information within 30 days of such change.

Effective January 1, 2002, New York's Physician Profile became available via the Department’s public web site at <https://www.health.ny.gov> as well as directly at <https://www.nydoctorprofile.com>. In addition,

a toll-free Call Center became operational on January 1, 2002 to assist both consumers and physicians in addressing questions regarding the Profile. Operation and maintenance of the Physician Profile and Call Center is currently performed by a vendor under a contract.

This RFP solicits proposals for maintenance of the Physician Profile and data collection on behalf of the Department pertaining to approximately 93,000 physicians licensed and registered to practice medicine in New York State, as set forth under Section 2995-a of the Public Health Law (Attachment L).

The successful bidder must continue to make physician profiles available to the public via a public web site and to support a toll-free Call Center to respond to physician and consumer inquiries and requests for hard copies.

The Department will work closely with the Contractor on all aspects of the services to be delivered. The Department is soliciting the services of a qualified Contractor and Subcontractor, (if necessary), to:

- Operate and maintain the public web site for purposes of public access to profile information;
- Collect all information necessary for physician profiles on an ongoing basis and utilize appropriate editing and verification methods;
- Correspond with physicians and provide them the opportunity to review profile information before public dissemination;
- Maintain existing tables from various databases that supply data to the Physician Profile web site (See Attachment M for a list of all data sources); and
- Staff and operate a Call Center to respond to questions regarding profile information as well as provide hard copies upon request.

2.2 Important Information

The bidder is required to review and is requested to have legal counsel review, [Attachment 8](#), the DOH Agreement as the Bidder must be willing to enter into an Agreement substantially in accordance with the terms of [Attachment 8](#) should the bidder be selected for contract award. Please note that this RFP and the awarded bidder's proposal will become part of the contract as Appendix B and C, respectively.

It should be noted that Appendix A of [Attachment 8](#), "Standard Clauses for New York State Contracts", contains important information related to the contract to be entered into as a result of this RFP and will be incorporated, without change or amendment, into the contract entered into between DOH and the successful Bidder. By submitting a response to the RFP, the Bidder agrees to comply with all the provisions of Appendix A.

Note, [Attachment 7](#), the Bidder's Certified Statements, should be submitted and includes a statement that the bidder accepts, without any added conditions, qualifications or exceptions, the contract terms and conditions contained in this RFP including any exhibits and attachments. It also includes a statement that the bidder acknowledges that, should any alternative proposals or extraneous terms be submitted with the proposal, such alternate proposals or extraneous terms will not be evaluated by the DOH.

Any qualifications or exceptions proposed by a bidder to this RFP should be submitted in writing using the process set forth in [Section 5.2 Questions](#) prior to the deadline for submission of written questions indicated in [Section 1.0](#) (Calendar of Events). Any amendments DOH makes to the RFP as a result of questions and answers will be publicized on the DOH web site.

2.3 Term of the Agreement

This contract term is expected to be for a period of ten (10) years commencing on or about the date shown on the Calendar of Events in [Section 1.0](#) and subject to the availability of sufficient funding, successful contractor performance, and approvals from the New York State Attorney General (AG) and the Office of the State Comptroller (OSC).

The pricing for years eight (8) through ten (10) of the contract is subject to an annual increase or decrease as described in [Section 5.4 \(Price Adjustment Clause\)](#).

3.0 BIDDERS QUALIFICATIONS TO PROPOSE

3.1 Minimum Qualifications

Eligible bidders include any company or organization that meets the following:

- Must have at least five (5) years of experience operating and maintaining a public web site; and
- Must have at least five (5) years of experience operating and maintaining tables from various databases.

Additionally, any contractor meeting both of the above criteria must demonstrate that they, or a named subcontractor, has the following level of experience:

- At least five (5) years of operating a call center

NYS DOH will **NOT** accept proposals from (or containing subcontracting arrangements with) organizations:

- That are a provider of health care services or be an organization or trade association or be affiliated with or owned by an organization or trade association whose primary business includes representing licensed and registered physicians or any Article 28 licensed provider or health care facility or provider.

For the purposes of this RFP, a prime contractor is defined as one who has the contract with the owner of a project or job and has full responsibility for its completion. A prime contractor undertakes to perform a complete contract and may employ (and manage) one or more subcontractors to carry out specific parts of the contract.

Failure to meet these Minimum Qualifications will result in a proposal being found non-responsive and eliminated from consideration.

4.0 SCOPE OF WORK

This Section describes the services that are required to be provided by the selected bidder. The selected bidder must be able to provide all of these services throughout the contract term.

PLEASE NOTE: The terms “bidders”, “vendors” and “proposers” are also used interchangeably. For purposes of this RFP, the use of the terms “shall”, “must” and “will” are used interchangeably when describing the Contractor’s/Bidder’s duties. **The use of the term “Call Center” shall refer to a call center solution, not a physical call center.**

4.1 Tasks/Deliverables

The Contractor must be able to perform the following services throughout the term of the contract:

Pursuant to the current contract for the Physician Profile, all data collected by the incumbent vendor for purposes of profiling, including the Profile Survey, public web site, source code, documentation developed pursuant to the contract, orientation manuals and questions and answers relating to operating the Call Center and any logo developed are the exclusive property of the Department. Accordingly, the State owns and will make available to the successor Contractor, at no cost, all computer programs, procedure manuals, operating plans, documentation, data, records, and related items to the existing Physician Profile System. See **Attachment S, Operation Manual** available via link or located on the DOH website with the RFP. The source code for the existing system was developed using Java/JSP with an Oracle database backend. No hardware is owned by the Department.

Important: Contractors may propose to use software other than existing profile software for one or more of the functions of this RFP with written approval from the State. If software other than the current software is used, it must be customized to meet Profile requirements, fully tested and proven to the State's satisfaction to provide adequate support to assume completion of all required functions within 180 days of the contract start date. The incumbent vendor is responsible for providing continuing support to any successor Contractor for a period of up to two months prior to the expiration of the contract.

The major activities that must be performed by the Contractor include:

1. **Host and Maintaining the Physician's Self Reporting Web Application and Public Web Site.**

Data for the website shall be collected through several avenues:

- a. data entered manually by the Contractor from hard copy profile surveys returned by physicians,
- b. a physician "self-report" application maintained by the Contractor, and
- c. data imported and verified from various other data systems as described in **Attachment O-1, Data Dictionary and Attachment O-2, Database Manual** which are available via link or located on the DOH website with the RFP. The public web site is currently available at:
<https://nydoctorprofile.com>.

2. **Update physician profile records through communications with physicians.**

Maintenance of the accuracy of the profile involves issuing routine and follow-up correspondence to physicians, data collection and verification of information from newly licensed and registered physicians; and, as necessary, making referrals to the OPMC, regarding non-respondent physicians. The Contractor will be expected to email a monthly report to the Department on metrics related to these tasks.

3. **Operate a Call Center.**

The call center includes both a Physician's Help Desk to answer questions from physicians and a Consumer Line to fulfill requests from consumers. Daily phone logs must be carefully maintained and monthly reports summarizing the activities of the Call Center must be produced.

See **Attachment J, NYPP Newsletter June 2021** available via link or located on the DOH website with the RFP, as an example of this report.

4. **Meet future changes to data collection.**

Over the life of the contract, the Contractor may be required to accept and translate new data sources into the profile or add new data to the public web site as a result of statutory changes.

Specific requirements to be completed by the Contractor in each of these areas are provided below:

4.1.1 Host and Maintaining the Physician's Self Reporting Web Application and Public Web Site

- a. The Contractor must develop and maintain capability for a physician to initially populate, as well as update and/or change required self-report information via the web as well as by hard copy. This task includes maintaining a self-reporting application along with appropriate security protocols, ensuring compatibility with all commonly utilized web browser and producing necessary user and downtime reports. The electronic self-reporting of information must reside on the Department's Health Commerce System, (HCS) for authentication, access and identification. HCS is a secure web-based system designed by the DOH specifically for electronically exchanging health-related data and information between health care providers and DOH. The department owns the URL of the Physician Profile public web site. The self-report application must comply with the Security Requirements as outlined in Section [4.2 SECURITY](#) of this RFP and in **Attachment Q, Security Requirements** which is available via link or located on the DOH website with the RFP.
- b. The Contractor must develop/maintain and update a public web site in accordance with Department security specifications and application standards. The Contractor will host the database server, web server and physician profile application. The public web site's functional requirements must meet or exceed the current website which is available at: <https://nydoctorprofile.com>. The public web site must comply with the Security Requirements as outlined in Section [4.2 SECURITY](#) of this RFP and in **Attachment Q, Security Requirements** which is available via link or located on the DOH website with the RFP.
- c. After acceptance of the technology required, the Contractor must provide software maintenance. Software maintenance is defined in the Institute of Electrical and Electronics Engineers (IEEE) Standard for Software Maintenance, IEEE 1219, as the modification of a software product after delivery to correct faults, improve performance or other attributes, or adapt the product to a modified environment. Maintenance is needed to ensure that the software continues to satisfy user requirements. The system changes due to corrective and non-corrective software actions. Maintenance must be performed in order to:
 - Correct faults
 - Improve the design
 - Implement enhancements
 - Interface with other systems
 - Adapt programs so that different hardware, software, system features and telecommunications facilities can be used
 - Migrate legacy software
 - Retire software

- d. The Contractor must make changes to the public web site, as approved and requested by the Department, which clarify information and/or enhance the accessibility or usefulness of profile information by consumers. During takeover, the Contractor must devote a full-time project manager to oversee design of systems that can be responsive to the need to accept new data feeds into the profile and capture new data elements over the life of the contract. At the end of takeover, and after acceptance of the database and software applications, Change System Requests (CSR) will be used by the Department to initiate any modifications to the system. The Contractor must respond in writing to the CSR within 15 business days of receipt. The response shall consist of an acknowledgement of the request and a preliminary assessment of the effort, (number of fully loaded change hours), required for completing the modification. A fully loaded change hour should include all costs associated with a system change, including labor, parts, shipping, profit, equipment and material, indirect costs and profit.
- e. Design of the web site and the backend database must take into consideration the potential for new data feeds and specification changes over the life of the contract.
- f. The Contractor must make daily refreshes to the public web site.
- g. The Contractor must maintain the capability of the public web site to handle up to 25,000 visitors per 24-hour period and up to 250,000 pages requests per 24-hour period. Upon becoming aware of an issue, the Contractor must email the department of public website downtime.
- h. The Contractor will ensure the industry standard response times for the user interface for the public website and the self-reporting application are met to ensure users are encouraged in completing the desired task.

4.1.2 Update Physician Profile Records through Communications with Physicians.

- a. Multiple sources of data contribute to the creation of the Physician Profile and are described in detail in the **Attachment M, Profile Data Sources**, available via link or located on the DOH website with the RFP.
 - The Contractor will be provided with a complete data file (quarterly) and transaction updates (weekly) from the State Education Department which includes a list of Physicians who are licensed to practice medicine in the State of New York. Newly added physicians must be identified by the Contractor on a monthly basis and provided to the Department.
 - The Contractor will be required to purchase the American Medical Association (AMA) Masterfile and American Osteopathic Association (AOA) database and sign Licensing Agreements with these organizations. The Department will reimburse the Contractor's actual cost of data acquisition from the AMA and AOA, subject to the Contractor obtaining best prices available. Monthly updates to data will be provided by the AMA and AOA and must be incorporated into the profile database.
 - The Department will provide the Contractor with all malpractice payments made in the prior month (monthly) and notification of all public New York license actions as it becomes available. The Contractor must store this data and identify any licensed physicians which meet criteria for public disclosure of this information as defined by Public Health Law section 2995-a.
- b. Both hard copy paper profiles and electronic profiles (provided to the physician through the self-report web application) must be pre-populated with information as follows:

- State Education Department files: name, address, license number, date licensed to practice medicine in New York State;
 - AMA and AOA: NPI, medical school, graduate medical education, board certifications and sub certifications; and
 - Department's medical malpractice and New York license actions.
- c. The Contractor will identify newly licensed and registered physicians based upon the weekly files received from the State Education Department (SED). Within 45 calendar days of initial registration with the SED, the Contractor will identify newly licensed physicians who did not initiate and complete their profile as required. These physicians will be mailed reminders as follows.
- Each month the Contractor will mail out an initial letter, signed (electronically) by the Department of Health, to all newly licensed and registered physicians in New York State who have not initiated and completed their profile. Initial letters will explain the profile requirement and provide instructions on how to complete the profile electronically via the web-based self-report web application maintained by the Contractor or request a hard copy. Physicians are instructed to initiate and complete their profile within 30 calendar days of the date of the letter. Based upon Physician Profile experience and data from SED, approximately 4,000 to 6,000 newly licensed and registered physicians in New York State are added to the Profile on an annual basis.
 - Thirty to forty-five calendar days after the date of the initial letter, the Contractor must send a reminder letter, signed (electronically) by the Department of Health, to all non-respondents reminding them that the Initial Profile Survey was due back within 30 calendar days of the date of the initial letter. Based upon recent experience, approximately 86 percent of all newly licensed and registered doctors require a reminder letter.
- d. If a physician submits their profile electronically via the self-report application on the Health Commerce System, all fields that do not require review must be posted on the public profile with 24 hours. Fields that require review include open-ended text fields. These must be reviewed by the Contractor to determine that they do not contain any prohibited language as defined in NYS regulations (10 CRR-NY 1000.1). Any language identified that is in question is forwarded to the Department for review and determination. Examples of open-ended text include:
- Out-of-State License Actions/Restrictions
 - Current Limitations
 - Hospital Privilege Restrictions
 - Criminal Convictions
 - Physician Statement

e. Alternatively, physicians may request, in writing, to submit their profile via hard copy. Upon such request, the Contractor must:

.Action	Timeframe
<p>Send the physician a letter along with the hard copy of the Physician Survey, (Attachment N available via link or located on the DOH website with the RFP).</p> <p>The letter must outline pre-populated information received from other sources and how to request correction and instruct the Physician to return their survey within 30 calendar days of the date on the letter.</p>	<p>Within five (5) business days of receipt of the written request.</p>
<p>Enter the information received back from Physician into their database.</p>	<p>Within five (5) business days.</p>
<p>Print a “review copy” of profile information and mail to physician along with a review letter to ensure Contractor correctly entered the information into database.</p>	<p>Within one (1) business day.</p>

If the physician...	The Contractor must...
<p>Does not submit changes within ten (10) calendar days.</p>	<p>Post the physician information to the public profile within twenty-four (24) hours.</p>
<p>Submits corrections to the review copy.</p>	<p>Enter the corrections and send a new review copy and letter allowing another ten (10) calendar days.</p>

Based upon recent Physician Profile experience, approximately 500-600 physicians request to complete their profile via hard copy each year. Approximately 175 physicians return their review copy with corrections to their profile data each year.

f. The Contractor must adhere to data verification protocols developed by the Department to verify self-reported information. The Contractor will become a designated agent of the Department for purposes of accessing the National Practitioner Data Bank (NPDB) and Healthcare Integrity and Protection Data Bank (HIPDB). The Department will reimburse the Contractor at cost of data acquisitions from such data banks. The Contractor will utilize the NPDB when a physician self-reports a medical malpractice payment or a disciplinary action but did not provide all the necessary information, or in instances when the Department is made aware that a malpractice payment or disciplinary action may be missing from a physician’s profile. The Contractor will perform monthly data verification checks on a random sample of five percent of physicians annually; based on the current number of licensed physicians this is approximately 400 data verification checks each month. The Department may also request the Contractor perform ad-hoc NPDB queries. Specifically, information to be verified from the NPDB and/or HIPDB must include:

- Medical Malpractice payments
- Out of State license actions
- Hospital Privilege Restrictions
- Failure to renew privileges in lieu of a pending action or investigation
- Criminal Convictions

If the Contractor identifies a discrepancy in information, the physician must be mailed a Data Verification letter requesting agreement with or changes to the information within 10 calendar days. If the physician disputes the information identified, they must contact the source of the data and the Contractor will suspend public dissemination until resolution is received. If no response is received after 10 calendar days, the Contractor will send a certified Data Verification letter. If the certified letter is signed as received and the physician does not submit a response within 10 calendar days, the information will be posted to the public profile within 24 hours. If the certified letter is undeliverable, the Contractor will refer the physician to the Department. It is estimated that up to 10% of data verification checks will result in a Data Verification letter being mailed to the physician.

- g. Medical malpractice history is obtained both through physician self-reporting and from files provided by the Department. All medical malpractice history (judgments, arbitration awards and settlements) is considered regardless of the state in which the event occurred. All judgment and arbitration awards made against the physician in the past 10 years must be included on the physician profile. In addition, settlements must be posted to the profile if the criteria outlined in section 2995-a of Public Health Law are met. Section 2995-a can be found in **Attachment L, Public Health Laws and Regulations** which is available via link or located on the DOH website with the RFP.

Current criteria are:

- The physician has had 3 or more medical malpractice settlements in the past 10 years, regardless of severity; OR
- The total number of malpractice settlements is two or fewer and the settlement(s) is/are deemed by the Department as relevant to patient decision-making (such as those resulting in death or permanent injury).

For all publicly disclosable settlements, judgments and/or awards, the public web site must provide information regarding the date of award, judgment or settlement; significance of each award, judgment or settlement; and zip code or county in which the event occurred. The significance of award is to be calculated by the Contractor and shown in graduated categories of below average, average, or above average, using the calculations outlined in NYS regulations (10 CRR-NY 1000.3).

- h. Every physician must be given the opportunity to review their medical malpractice history and how it will be disclosed on the public web site prior to such public disclosure. Each month the Contractor will initiate a separate mailing, referred to as the Medical Malpractice Review Copy, to be sent to physicians having medical malpractice judgments, settlements and/or awards where payments have been awarded to complaining parties. The physician may either dispute the facts or appeal the severity (see below), with a response within 30 calendar days. Physicians may submit an extension request. The extension request must meet the criteria specified in regulations (10 CRR-NY 1000.3). The Contractor will send all requests meeting the criteria to the Department within one business day. The Department will notify the Contractor of a decision and the Contractor will send written correspondence of such decision within one business day. The Contractor will suspend public dissemination of malpractice information during the 30-calendar day response period (and extension period if granted) and until a determination is made for any disputes or appeals.
- Disputes: For any medical malpractice history that meets the criteria for public disclosure, the physician may correct any factual inaccuracies on the medical malpractice review copy and return it to the Contractor within 30 calendar days. Each month the Contractor will submit all disputes electronically to the Department for review and decision.

- Appeals: If a physician has 2 or fewer settlements within the last 10 years, the Contractor must afford the physician the opportunity to appeal to the Department concerning whether the settlement is relevant to patient decision-making. The Contractor will review the appeal materials submitted by the physician to determine if the request was received within the required 30- calendar day-time period and whether the request is appealable. The Contractor will submit all appeals meeting this criterion to the Department as they are received. The Department will convene a review panel to make appeal determinations. The Department will notify the physician and the Contractor of the decision.
- i. Based upon recent Physician Profiling experience, there are approximately 1,000 medical malpractice review letters that will need to be sent to physicians each year. This not only includes newly licensed doctors but doctors whose existing medical malpractice history has changed.
 - Each month, the Contractor will send a letter to all physicians with a malpractice claim in which the severity is not indicated (self-reported or reported by the Department). This is required to determine appropriateness of public disclosure. If no response is received after 10 calendar days, the Contractor will send a certified Severity letter. If the certified letter is signed as received and the physician does not submit a response to the severity, the Contractor will post the claim to the profile the next business day as if it is relevant to patient decision-making. If the certified letter is undeliverable, the Contractor will refer the physician to the Department. Approximately 250 letters will need to be sent each year to physicians seeking clarification of the severity of the medical malpractice case.
 - j. Physicians in the weekly file from SED whose registration to practice medicine in New York has lapsed must be removed from the public web site within 24 hours.
 - k. The Department will provide the Contractor with notification of all new board actions as the information becomes available. The Contractor will utilize the OPMC public website to search these physicians and identify any revocations, suspensions, surrenders, summary orders and permanent restrictions precluding the practice of medicine. For physicians with any of these actions, the Contractor must inactivate the profile from the public website and add a notation of the status of the license (i.e. revocation, suspension or surrender). In addition, a link to the OPMC public website will remain on the profile, linked to the physician's public OPMC actions. The profile will remain inactive until the expiration of such action. If the action is anything other than a revocation, suspension, surrender or permanent restriction precluding the practice of medicine, and the physician is active with SED, the action is entered to the physician's profile and a Data Notification Letter is mailed to the physician informing of the action that was entered. Physicians are instructed to review their profile information on the NYPP public site. No further correspondence is needed since this information is not disputable. On average, less than 10 Data Notification letters are mailed each month.
 - l. Each month the Department will query the list of newly licensed doctors (provided by the Contractor) to determine if any have public board actions within the last 10 years. Any matches are shared with the Contractor within 5 business days to update the physician's profile. The Contractor must complete these updates of the physician profile within 5 business days.

- m. The Contractor must provide for sufficient electronic storage space to maintain all Initial Profile Surveys, Review Copies, Update/Correction Copies and any other correspondence with physicians for 10 years. Contractor must ensure that only appropriate personnel have access to the files and that they are maintained in a secure environment.

4.1.3 OPERATION OF CALL CENTER

- a. The Contractor shall staff and operate a Call Center within the continental United States that includes a Physician's Help Desk to answer questions from physicians regarding any aspect of the New York Profile and a separate Consumer Help-Line to answer individual profile questions. This Call Center must be staffed by individuals working within the continental United States. The Contractor must staff the Physician's Help Desk to support the electronic submission of changes in profile information Monday through Friday from 8:00 AM to 5:00 PM EST. The Contractor shall also maintain the capability to voice record messages received during off hours and return messages the next business day. The consumer Help-Line must offer interpretation services in Chinese, Spanish, Russian, Korean, Italian, Polish, Arabic and Haitian Creole.
- b. Based upon April to September 2020 experience, approximately 1,000 to 1,500 calls per month are received from physicians. Call volume is the highest following reminder emails sent to physicians by the Department (usually mid-month). If there is a statewide mailing required for all physicians, call volume may be exceptionally high for approximately one week depending on the nature of the mailing. The Department shall make a reasonable effort to notify the Contractor at least 30 calendar days in advance of any statewide physician mailing. Approximately 200 to 300 calls per month are received from consumers. The average talk time for incoming phone calls is five to seven minutes.
- c. The Contractor must ensure that staff are trained to address inquiries concerning profiles, browser and connection problems, and requirements for the Health Commerce System (HCS). Call center staff shall forward ID/password related calls to the NYS Commerce Accounts Management Unit (CAMU), as well as make necessary referrals to the OPMC and other Department units when appropriate.
- d. The Contractor must maintain and distribute copies of an orientation manual on the physician profiling system to all Call Center staff. In addition, the Contractor must develop, and keep updated, a list of frequently asked questions and responses to be available to all Call Center staff.
- e. The Contractor shall assume responsibility for staffing the Call Center such that a caller will not wait in excess of 5 minutes to speak to a Call Center representative during business hours. The Contractor must ensure that voice recorded messages are returned between the hours of 8:00 am and 5:00 pm the next business day. The Contractor must periodically survey callers from both the physician and consumer call lines or monitor calls to ensure quality of responses by the Call Center. The Contractor must write a quality assurance protocol to be approved by the Department and results must be made available upon request.

4.1.4 REPORTING

- a. The Contractor must provide data files to the Department on a monthly basis. Data file format and mandatory fields will be defined by the Department.

- A list of all newly licensed and registered physicians (identified from SED files).
 - A list of all newly licensed physicians who were non-responsive ninety calendar days after the date of the initial letter.
 - A list of all physicians whose SED registration will expire in 6 months.
 - A list of all physicians whose SED registration will expire in 3 months and have not updated their profile in the previous 3 months.
 - A list of all physicians who re-registered in the current month and did not update their profile within 6 months of re-registration.
- b. The Contractor must provide routine reports to the Department on various metrics related to efforts to updating and maintaining the profile database. The Contractor will provide the reports outlined in the **Attachment K, Monthly-Annual Reporting Requirements** which is available via link or located on the DOH website with the RFP and will email to the Department by the 10th of the following month (e.g. for March, will be due April 10).
- c. The Contractor will provide an annual report by email to the Department by January 31st containing all elements of each periodic report as described in **Attachment K, Monthly-Annual Reporting Requirements** which is available via link or located on the DOH website with the RFP.
- d. The Contractor will also be required to participate in periodic conference calls and/or meetings with Office of Professional Medical Conduct staff, as necessary.

4.2 Security

Within the first 60 days of the contract start date, the Contractor must provide to the Department a security plan that describes their security and compliance with all applicable NYS policies and standards.

The Contractor shall comply with all privacy and security policies and procedures of the Department (<https://its.ny.gov/eiso/policies/security>) and applicable state and federal law and administrative guidance with respect to the performance of this contract. The Contractor is required to execute a number of security and privacy agreements with the Department including a Business Associate Agreement (Appendix H) and a Data Use Agreement (DUA) at contract signing.

The Contractor is expected to provide secure and confidential backup, storage and transmission for hard copy and electronically stored information. Under no circumstances will any records be released to any person, agency, or organization without specific written permission of the DOH. The Contractor is obligated to ensure any Subcontractor hired by Contractor who stores, processes, analyzes or transmits Machine Control Data, (MCD) on behalf of Contractor has the appropriate Security requirements in place. Contractor is required to include in all contracts and Business Associate Agreements with their Subcontractors language surrounding the security and privacy requirements as well as the language contained in the Confidentiality Language for Third Parties section of the DUA. If any breach or suspected breach of the data or confidentiality occurs, whether the breach occurred with the Contractor or Subcontractor, DOH must be notified immediately.

The Contractor is required to maintain and provide to the Department upon request their data confidentiality plans and procedures for meeting security requirements as they relate to the deliverables and services within this RFP, including all plans as they relate to subcontractor work where applicable.

The Contractor will develop and maintain adequate fully trained staff to respond to all stakeholder inquiries while protecting confidentiality and maintaining the security and integrity of all systems. Staff must be trained to understand and observe requirements related to confidentiality and operating guidelines for functions included in this RFP.

The Contractor will comply fully with all current and future updates of the security procedures of the DOH, as well as with all applicable State and federal requirements, in performance of this contract.

4.3 Takeover and Turnover

The major objectives of the takeover and turnover periods are to:

- Provide an efficient, orderly and controlled transition to the successful Contractor;
 - Minimize any disruption of services provided to physicians, consumers and other users of the Physician Profile System; and
 - Retain, enhance or replace existing systems, procedures and operating practices.
- a. The Contractor is required to assemble a management team to oversee takeover. The management team is expected to work closely with the State and the current Contractor during the takeover period. The current Contractor is contractually obligated to provide up to two months' service.
 - b. After takeover activities are completed, the management team of the Contractor will assume responsibility for the facility and operations. The management team must be identified and installed at the beginning of the takeover period.
 - c. The Contractor shall, upon selection, prepare a detailed takeover plan for State approval. This plan must include:
 - Planned activities;
 - Staffing level plans;
 - Schedule of events;
 - A checklist software acceptance system to ensure the complete testing and acceptance of each program and procedure used in the administration of the Physician Profile;
 - A listing of additional equipment required in order to implement the proposed work plan; and
 - A plan for ensuring the complete review and operation of each computer program and procedure.

Administrative functions, including accounting, purchasing, and assuring confidentiality and security will not be turned over to the Contractor by the current Contractor. These functions must be implemented either in preparation for, or during, the takeover period. A detailed plan showing activities and staffing levels during the takeover period shall be delivered for State approval within 30 days of contract start date.

- d. The Contractor is required to ensure that, upon the expiration of the 180-day takeover period, experienced and trained personnel are available to continue all operations without interruption of service to physicians, consumers and other users.
- e. During takeover, the Contractor will be responsible for staffing all required functions with trained employees. To take advantage of the current Contractor's two-month turnover responsibility, the Contractor must commit personnel to the formal and on-the-job training provided, unless otherwise

agreed to by the State. The current Contractor's emphasis will be on training the successor Contractor's management personnel. The Contractor will be responsible for training of non-management personnel.

- f. During takeover, the Contractor will be responsible for assuming the processing, or acquisition where appropriate, of the computer programs, files and systems software necessary for the Contractor's functions. Additionally, the Contractor will be responsible for ensuring full compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
- g. During takeover, the Contractor will be responsible for assuming the operation, maintenance, and acquisition where appropriate, of the computer hardware necessary to support profile processing functions.
- h. The Contractor will be responsible for developing a Disaster Recovery Plan, (DRP), presented as part of the proposal, into a fully functional and documented arrangement during the takeover process. The disaster recovery plan shall include written procedures, responsible individuals, test results, and a periodic test schedule and shall be presented to the State for approval. Equipment backup must be tested for compatibility and capacity, with any identified shortcomings corrected. The Contractor shall complete the installation of the operations staff within the 180-day takeover period. Contractor shall modify the DRP, software installation procedures and operational procedures as needed to reflect the changes implemented with new data sources, if the system changes or any enhancements will impact the disaster recovery capability. Modifications to the DRP must be submitted to DOH for review and approval. Contractor shall execute the DRP test to demonstrate the capability of the DRP to restore processing capability for all critical system components at the DR site. The DRP test must be included as part of product acceptance and be executed annually after the implementation of the Physician Profile.
- i. The Contractor shall assume responsibility, without interruption of service to physicians, consumers and other users, for the maintenance and development of forms, manuals, procedures and documentation for all current operations. These documents must be approved by Department prior to issuance.
- j. Progress reports to the State shall be submitted by the Contractor at two-week intervals beginning two weeks after start of the contract. These reports must include significant events, progress on software acceptance, staffing levels, problems encountered, planned activities for the next two reporting periods, meetings held, and any other information deemed necessary by the State.
- k. Experienced personnel are vital to a smooth turnover, and the Contractor shall encourage all employees, including management, to remain throughout turnover. Over the final six months of the contract term, the Contractor shall not transfer or otherwise reassign any of its dedicated staff without prior State approval.
- l. In order to ensure the State's or the Contractor's success in assuming operation of the proposed and delivered solution should that be required during or at the end of the contract, the Contractor will be required to define and execute a knowledge transfer plan for transitioning system knowledge to staff identified by the Department or by the successor Contractor that meets the following requirements:
 - The plan must include a process by which the Contractor's system can be fully migrated to the Departments or successor Contractor's resources.

- The plan must include walk-throughs with the States or successor Contractor’s staff of the fully configured system and documentation, as to be installed in the States or successor Contractor’s production environment.
 - The plan must include all aspects of system and user administration, roles and responsibilities, software installation, and configuration.
 - The plan must also include full conveyance of knowledge of the software and its implementation and execution to the States or successor Contractor’s identified trainer(s).
 - The plan must acknowledge that all software assets developed and paid for under this contract are to be turned over to the State or successor Contractor at the end of the contract in their entirety, regardless of what tools were used to create and manage them. Upon turnover of the awarded contract to a successor Contractor, the Contractor shall turn over all Profile operating documents, including, but not limited to audits, physician data, and systems documentation. The State will own all program software which the Contractor shall transfer to the State or, at the State's option, to the successor Contractor, at no cost.
 - The plan must be delivered to the Department in its entirety four months after the 180-day takeover period ends. It must be kept current for the life of the contract.
- m. The Contractor is required to provide two months of turnover training for the successor Contractor's management in the operation and maintenance of the program. The turnover assistance furnished by the Contractor must include the development of a training plan. In addition, the Contractor shall make the following available to the State or successor Contractor during the turnover phase, in addition to any other proposed resources:
- Access to facilities
 - Detailed turnover plan
 - Availability of computer resources during turnover for training and testing, to be scheduled outside normal hours
 - Computer system time scheduled within the resources available under the supervision of current Contractor staff
 - Three computer terminals available for testing and training during normal working hours
 - Space, desks, reasonable office support (copiers, etc.) provided for turnover staff of the successor Contractor and the State
 - Access to current Contractor employees for interview and recruitment purposes during normal business hours.

4.4 Additional Requirements

- a. The Contractor must maintain a minimum set of supported Web browsers to ensure the Physician Profile website provides the best experience for providers to upload their information. Some Web pages and Web-based applications hosted by the Department require the Web browser to support JavaScript and to accept session-based cookies. By default, the major Web browsers are configured to handle this requirement.

Supported Web Browsers

- Google Chrome (Latest)
- Firefox (Latest)
- OSX Safari (Latest)
- iOS Safari (Latest)

- Internet Explorer (likely multiple versions)
 - Google Android (possibly multiple versions)
 - Because some Internet Explorer and Google Android browser versions with significant market-share do not auto-upgrade, versions must be evaluated independently against the 2% rule (e.g. Internet Explorer 8, 9 etc.). All browsers that have 2% or more share of a site/app's user base must be tested and functional. Current United States market-share statistics (e.g. [StatCounter](#)) can serve as a starting point, but analytics from the actual userbase (e.g. Google Analytics) must be used whenever available to make a support determination.
- b. The site must display properly on a variety of devices. For better support on mobile devices, a Responsive Web Design (RWD) is recommended.
 - c. The selection and purchase of hardware and software by the Contractor must be approved in advance by the Department to ensure compatibility with departmental systems and all software will be owned by the Department.
 - d. The Contractor will assume all liability for maintenance and security of Profile Surveys, all supporting databases and the public web site and ensuring compliance with the federal HIPAA.
 - e. The Contractor will indemnify the State from any lawsuits relating to inaccurate data which the Contractor has independently verified or any inaccurate data resulting from data entry, for which the Contractor has responsibility,
 - f. The Contractor will maintain protocols, subject to the approval of the Department, to ensure the accuracy, completeness, timeliness and security of data.
 - g. The Contractor will assume responsibility for security of all profile data. The Contractor will provide the Department with access to all documentation, source code and on-site system access as required to audit and monitor the Contractor's compliance with the NYS Security policies and standards.
 - h. All data collected by the Contractor for purposes of profiling, Profile Survey, public web site, source code, all systems developed for purposes for profiling, all systems documentation developed pursuant to the contract, orientation manuals and questions and answers relating to operating the Call Center and any logo utilized shall be the exclusive property of the Department.

5.0 ADMINISTRATIVE INFORMATION

The following administrative information will apply to this RFP. Failure to comply fully with this information may result in disqualification of your proposal.

5.1 Restricted Period

“Restricted period” means the period of time commencing with the earliest written notice, advertisement, or solicitation of a Request for Proposals (“RFP”), Invitation for Bids (“IFB”), or solicitation of proposals, or any other method for soliciting a response from Bidders intending to result in a procurement contract with DOH and ending with the final contract award and approval by DOH and, where applicable, final contract approval by the Office of the State Comptroller.

This prohibition applies to any oral, written, or electronic communication under circumstances where a reasonable person would infer that the communication was intended to influence this procurement. Violation of any of the requirements described in this Section may be grounds for a determination that the bidder is non-responsible and therefore ineligible for this contract award. Two (2) violations within four (4) years of the rules against impermissible contacts during the “restricted period” may result in the violator being debarred from participating in DOH procurements for a period of four (4) years.

Pursuant to State Finance Law §§ 139-j and 139-k, the Department of Health identifies a designated contact on face page of this RFP to whom all communications attempting to influence this procurement must be made.

5.2 Questions

There will be an opportunity available for submission of written questions and requests for clarification with regard to this RFP. All questions and requests for clarification of this RFP should cite the particular RFP Section and paragraph number where applicable and must be submitted via email to: OPMCFiscal@health.ny.gov. It is the bidder’s responsibility to ensure that email containing written questions and/or requests for clarification is received at the above address no later than the Deadline for Submission of Written Questions as specified in [Section 1.0 \(Calendar of Events\)](#). Questions received after the deadline may **not** be answered.

5.3 Right to Modify RFP

DOH reserves the right to modify any part of this RFP, including but not limited to, the date and time by which proposals must be submitted and received by DOH, at any time prior to the Deadline for Submission of Proposals listed in [Section 1.0 \(Calendar of Events\)](#). Modifications to this RFP shall be made by issuance of amendments and/or addenda.

Prior to the Deadline for Submission of Proposals, any such clarifications or modifications as deemed necessary by DOH will be posted to the DOH website.

If the bidder discovers any ambiguity, conflict, discrepancy, omission, or other error in this RFP, the Bidder shall immediately notify DOH of such error in writing at: OPMCFiscal@health.ny.gov and request clarification or modification of the document.

If, prior to the Deadline for Submission of Proposals, a bidder fails to notify DOH of a known error or an error that reasonably should have been known, the bidder shall assume the risk of proposing. If awarded the contract, the bidder shall not be entitled to additional compensation by reason of the error or its correction.

5.4 Payment

The contractor shall submit invoices and/or vouchers to the State's designated payment office.

Preferred Method: Email a .pdf copy of your signed voucher to: OPMCFiscal@health.ny.gov with a subject field as follows:

Subject: **Unit ID: 3450369, Contract # TBD**

Alternate Method: Mail vouchers to DOH at the following U.S. postal address:

**NYS Department of Health
Unit ID: 3450369
Office of Professional Medical Conduct
Riverview Center Suite 355
150 Broadway
Menands, NY 12204**

Payment for invoices and/or vouchers submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with ordinary State procedures and practices. The CONTRACTOR shall comply with the State Comptroller's procedures to authorize electronic payments. Authorization forms are available at the State Comptroller's website at <https://www.osc.state.ny.us/state-vendors>, by email at epayments@osc.state.ny.us or by telephone at 518-474-6019. CONTRACTOR acknowledges that it will not receive payment on any invoices and/or vouchers submitted under this Contract if it does not comply with the State Comptroller's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

In addition to the Electronic Payment Authorization Form, a Substitute Form W-9 must be on file with the Office of the State Comptroller, Bureau of Accounting Operations. Additional information and procedures for enrollment can be found at <https://www.osc.state.ny.us/state-vendors>.

Completed W-9 forms should be submitted to the following address:

NYS Office of the State Comptroller
Bureau of Accounting Operations
Warrant & Payment Control Unit
110 State Street, 9th Floor
Albany, NY 12236

Payment of such invoices and/or vouchers by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be:

The Contractor shall be paid the fixed price amount, for the one-time deliverables upon the successful completion of all the tasks associated with the deliverable (Takeover Plan, Physician Self Report Application, Website Delivery, and Security Plan.)

Once these deliverables are met, the Contractor will be paid monthly for the maintenance of system, call center operations and required reporting.

The Contractor shall be paid the fixed price amount for a Knowledge Transfer plan if delivered within 120 days of the completion of contract takeover.

At the conclusion of the contract, the successor contractor will be afforded a two-month transition period with the contractor. At the conclusion of this time, the contractor will be paid one-time turnover task associated with this deliverable.

Payment will not be made for the turnover task if the current Contractor is awarded the subsequent contract.

Price Adjustment Clause

The pricing for years eight (8) through ten (10) of the contract is subject to an annual increase or decrease of the lesser of three percent (3%) or the percent increase or decrease in the National Consumer Price Index for All Urban Consumers (CPI-U) index <https://www.bls.gov/cpi/> as published by the United States Bureau of Labor Statistics, Washington, D.C., 2012 for the 12 month period ending ninety (90) days prior to the renewal date for years eight (8) through ten (10) of the contract.

5.5 Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health (“DOH”) recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" (“Disparity Study”). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women – owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, DOH hereby establishes an overall goal of **0%** for MWBE participation, **0%** for Minority-Owned Business Enterprises (“MBE”) participation and **0%** for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: <https://ny.newnycontracts.com>. The directory is found in the upper right-hand side of the webpage under “Search for Certified Firms” and accessed by clicking on the link entitled “MWBE Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

New York State certified Minority- and Women-Owned Businesses (M/WBE) may request that their firm’s contact information be included on a list of M/WBE firms interested in serving as a subcontractor for this procurement. The listing will be publicly posted on the Department’s website for reference by the bidding community. A firm requesting inclusion on this list should send contact information and a copy of its NYS M/WBE certification to OPMCFiscal@health.ny.gov before the Deadline for Questions as specified in [Section 1.0](#) (Calendar of Events). Nothing prohibits an M/WBE Vendor from proposing as a prime contractor.

Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

5.6 Equal Employment Opportunity (EEO) Reporting

By submission of a bid in response to this solicitation, the Bidder agrees with all of the terms and conditions of [Attachment 8](#) Appendix A including Clause 12 - Equal Employment Opportunities for Minorities and Women. Additionally, the successful bidder will be required to certify they have an acceptable EEO (Equal Employment Opportunity) policy statement in accordance with Section III of Appendix M in [Attachment 8](#).

Further, pursuant to Article 15 of the Executive Law (the “Human Rights Law”), all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

The Contractor is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work"), except where the Work is for the beneficial use of the

Contractor, undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to: (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

To ensure compliance with this Section, the Bidder must submit with the bid or proposal an Equal Employment Opportunity Staffing Plan ([Attachment 5](#), Form #4) identifying the anticipated work force to be utilized on the Contract. Additionally, the Bidder must submit a Minority and Women-Owned Business Enterprises and Equal Employment Opportunity Policy Statement ([Attachment 5](#), Form # 5), to DOH with their bid or proposal.

5.7 Sales and Compensating Use Tax Certification (Tax Law, § 5-a)

Section 5-a of the Tax Law, as amended, effective April 26, 2006, requires certain contractors awarded state contracts for commodities, services and technology valued at more than \$100,000 to certify to the Department of Tax and Finance (DTF) that they are registered to collect New York State and local sales and compensating use taxes. The law applies to contracts where the total amount of such contractors' sales delivered into New York State are in excess of \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made, and with respect to any affiliates and subcontractors whose sales delivered into New York State exceeded \$300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made.

This law imposes upon certain contractors the obligation to certify whether or not the contractor, its affiliates, and its subcontractors are required to register to collect state sales and compensating use tax and contractors must certify to DTF that each affiliate and subcontractor exceeding such sales threshold is registered with DTF to collect New York State and local sales and compensating use taxes. The law prohibits the State Comptroller, or other approving agencies, from approving a contract awarded to an offerer meeting the registration requirements but who is not so registered in accordance with the law.

The successful Bidder must file a properly completed Form ST-220-CA with the Department of Health and Form ST-220-TD with the DTF. These requirements must be met before a contract may take effect. Further information can be found at the New York State Department of Taxation and Finance's website, available through this link: <http://www.tax.ny.gov/pdf/publications/sales/pub223.pdf>.

Forms are available through these links:

- ST-220 CA: http://www.tax.ny.gov/pdf/current_forms/st/st220ca_fill_in.pdf
- ST-220 TD: http://www.tax.ny.gov/pdf/current_forms/st/st220td_fill_in.pdf

5.8 Contract Insurance Requirements

Prior to the start of work under this Contract, the CONTRACTOR shall procure, at its sole cost and expense, and shall maintain in force at all times during the term of this Contract, insurance of the types and in the amounts set forth in [Attachment 8](#), the New York State Department of Health Contract, Section IV. Contract Insurance Requirements.

5.9 Subcontracting

Bidder's may propose the use of a subcontractor. The Contractor shall obtain prior written approval from NYSDOH before entering into an agreement for services to be provided by a subcontractor. The Contractor is solely responsible for assuring that the requirements of the RFP are met. All subcontracts shall contain provisions specifying that the work performed by the subcontractor must be in accordance with the terms of the prime contract, and that the subcontractor specifically agrees to be bound by the confidentiality provisions set forth in the agreement between the DOH and the Contractor. DOH reserves the right to request removal of any bidder's staff or subcontractor's staff if, in DOH's discretion, such staff is not performing in accordance with the Agreement. Subcontractors whose contracts are valued at or above \$100,000 will be required to submit the Vendor Responsibility Questionnaire upon selection of the prime contractor.

5.10 DOH's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all proposals received in response to the RFP;
2. Withdraw the RFP at any time, at the agency's sole discretion;
3. Make an award under the RFP in whole or in part;
4. Disqualify any bidder whose conduct and/or proposal fails to conform to the requirements of the RFP;
5. Seek clarifications and revisions of proposals;
6. Use proposal information obtained through site visits, management interviews and the state's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;
7. Prior to the bid opening, amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available;
8. Prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments;
9. Change any of the scheduled dates;
10. Eliminate any mandatory, non-material specifications that cannot be complied with by all of the prospective bidders;
11. Waive any requirements that are not material;
12. Negotiate with the successful bidder within the scope of the RFP in the best interests of the state;
13. Conduct contract negotiations with the next responsible bidder, should the Department be unsuccessful in negotiating with the selected bidder;
14. Utilize any and all ideas submitted in the proposals received;
15. Every offer shall be firm and not revocable for a period of three hundred and sixty-five days from the bid opening, to the extent not inconsistent with section 2-205 of the uniform commercial code. Subsequent to such three hundred and sixty-five days, any offer is subject to withdrawal communicated in a writing signed by the offerer; and,
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's proposal and/or to determine an offerer's compliance with the requirements of the solicitation.

5.11 Freedom of Information Law (“FOIL”)

All proposals may be disclosed or used by DOH to the extent permitted by law. DOH may disclose a proposal to any person for the purpose of assisting in evaluating the proposal or for any other lawful purpose. All proposals will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the proposal that a Bidder believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the proposal as directed in [Section 6.1\(B\)](#) of the RFP.** If DOH agrees with the proprietary claim, the designated portion of the proposal will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

5.12 Lobbying

Chapter 1 of the Laws of 2005, as amended by Chapter 596 of the Laws of 2005, made significant changes as it pertains to development of procurement contracts with governmental entities. The changes included:

- a) made the lobbying law applicable to attempts to influence procurement contracts once the procurement process has been commenced by a state agency, unified court system, state legislature, public authority, certain industrial development agencies and local benefit corporations;
- b) required the above-mentioned governmental entities to record all contacts made by lobbyists and contractors about a governmental procurement so that the public knows who is contacting governmental entities about procurements;
- c) required governmental entities to designate persons who generally may be the only staff contacted relative to the governmental procurement by that entity in a restricted period;
- d) authorized the New York State Commission on Public Integrity, (now New York State Joint Commission on Public Ethics), to impose fines and penalties against persons/organizations engaging in impermissible contacts about a governmental procurement and provides for the debarment of repeat violators;
- e) directed the Office of General Services to disclose and maintain a list of non-responsible bidders pursuant to this new law and those who have been debarred and publish such list on its website;
- f) required the timely disclosure of accurate and complete information from offerers with respect to determinations of non-responsibility and debarment; (Bidders responding to this RFP should submit a completed and signed [Attachment 1](#), (“Prior Non-Responsibility Determination”).)
- g) increased the monetary threshold which triggers a lobbyist’s obligations under the Lobbying Act from \$2,000 to \$5,000; and
- h) established the Advisory Council on Procurement Lobbying.

Subsequently, Chapter 14 of the Laws of 2007 amended the Lobbying Act of the Legislative Law, particularly as it related to specific aspects of procurements as follows: (i) prohibiting lobbyists from entering into retainer agreements on the outcome of government grant making or other agreement

involving public funding; and (ii) reporting lobbying efforts for grants, loans and other disbursements of public funds over \$15,000.

The most notable, however, was the increased penalties provided under Section 20 of Chapter 14 of the Laws of 2007, which replaced old penalty provisions and the addition of a suspension option for lobbyists engaged in repeated violations. Further amendments to the Lobbying Act were made in Chapter 4 of the Laws of 2010.

Questions regarding the registration and operation of the Lobbying Act should be directed to the New York State Joint Commission on Public Ethics.

5.13 State Finance Law Consultant Disclosure Provisions

In accordance with New York State Finance Law Section 163(4)(g), State agencies must require all contractors, including subcontractors, that provide consulting services for State purposes pursuant to a contract to submit an annual employment report for each such contract.

The successful bidder for procurements involving consultant services must complete a "State Consultant Services Form A, Contractor's Planned Employment Form Contract Start Date through End of Contract Term" in order to be eligible for a contract.

The successful bidder must also agree to complete a "State Consultant Services Form B, Contractor's Annual Employment Report" for each state fiscal year included in the resulting contract. This report must be submitted annually to the Department of Health, the Office of the State Comptroller, and Department of Civil Service.

State Consultant Services Form A: Contractor's Planned Employment and Form B: Contractor's Annual Employment Report may be accessed electronically at:

<http://www.osc.state.ny.us/agencies/forms/ac3271s.doc> and

<http://www.osc.state.ny.us/agencies/forms/ac3272s.doc>.

5.14 Debriefing

Pursuant to Section 163(9)(c) of the State Finance Law, any unsuccessful Bidder may request a debriefing regarding the reasons that the proposal or bid submitted by the Bidder was not selected for award. Requests for a debriefing must be made within fifteen (15) calendar days of release of the written or electronic notice by the Department that the Bid submitted by the Bidder was not selected for award. Requests should be submitted in writing to a designated contact identified in the award/non-award letter.

5.15 Protest Procedures

In the event unsuccessful bidders wish to protest the award resulting from this RFP, bidders should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found in Chapter XI Section 17 of the Guide to Financial Operations (GFO). Available on-line at:

<http://www.osc.state.ny.us/agencies/guide/MyWebHelp/>

5.16 Iran Divestment Act

By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, Bidder/Contractor (or any assignee) certifies that it is not on the “Entities Determined To Be Non-Responsive Bidders/Offerers Pursuant to The New York State Iran Divestment Act of 2012” list (“Prohibited Entities List”) posted on the OGS website (currently found at this address: <https://ogs.ny.gov/debarred-and-non-responsible-entities>) and further certifies that it will not utilize on such Contract any subcontractor that is identified on the Prohibited Entities List. Additionally, Bidder/Contractor is advised that should it seek to renew or extend a Contract awarded in response to the solicitation, it must provide the same certification at the time the Contract is renewed or extended.

During the term of the Contract, should DOH receive information that a person (as defined in State Finance Law § 165-a) is in violation of the above-referenced certifications, DOH will review such information and offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment activity which is in violation of the Act within 90 days after the determination of such violation, then DOH shall take such action as may be appropriate and provided for by law, rule, or contract, including, but not limited to, seeking compliance, recovering damages, or declaring the Contractor in default. DOH reserves the right to reject any bid, request for assignment, renewal or extension for an entity that appears on the Prohibited Entities List prior to the award, assignment, renewal or extension of a contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the Prohibited Entities list after contract award.

5.17 Piggybacking

New York State Finance Law section 163(10)(e) (see also <http://www.ogs.ny.gov/purchase/snt/sflxi.asp>) allows the Commissioner of the NYS Office of General Services to consent to the use of this contract by other New York State Agencies, and other authorized purchasers, subject to conditions and the Contractor’s consent.

5.18 Encouraging Use of New York Businesses in Contract Performance

Public procurements can drive and improve the State’s economic engine through promotion of the use of New York businesses by its contractors. New York State businesses have a substantial presence in State contracts and strongly contribute to the economies of the state and the nation. In recognition of their economic activity and leadership in doing business in New York State, bidders/proposers for this contract for commodities, services or technology are strongly encouraged and expected to consider New York State businesses in the fulfillment of the requirements of the contract. Such partnering may be as subcontractors, suppliers, protégés or other supporting roles. All bidders should complete [Attachment 6](#), Encouraging Use of New York Businesses in Contract Performance, to indicate their intent to use/not use New York Businesses in the performance of this contract.

5.19 Diversity Practices Questionnaire

Diversity practices are the efforts of contractors to include New York State-certified Minority and Women-owned Business Enterprises (“MWBEs”) in their business practices. Diversity practices may include past, present, or future actions and policies, and include activities of contractors on contracts with private entities and governmental units other than the State of New York. Assessing the diversity practices of contractors enables contractors to engage in meaningful, capacity-building collaborations with MWBEs.

5.20 Participation Opportunities for NYS Certified Service-Disabled Veteran-Owned Businesses

Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses (“SDVOBs”), thereby further integrating such businesses into New York State’s economy. DOH recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of DOH contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders/Contractors are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

For purposes of this procurement, DOH conducted a comprehensive search and determined that the Contract does not offer sufficient opportunities to set specific goals for participation by SDVOBs as subcontractors, service providers, and suppliers to Contractor. Nevertheless, Bidder/Contractor is encouraged to make good faith efforts to promote and assist in the participation of SDVOBs on the Contract for the provision of services and materials. The directory of New York State Certified SDVOBs can be viewed at: <https://ogs.ny.gov/veterans/>

Bidders are encouraged to contact the Office of General Services’ Division of Service-Disabled Veteran’s Business Development at 518-474-2015 or VeteransDevelopment@ogs.ny.gov to discuss methods of maximizing participation by SDVOBs on the Contract.

5.21 Intellectual Property

Any work product created pursuant to this agreement and any subcontract shall become the sole and exclusive property of the New York State Department of Health, which shall have all rights of ownership and authorship in such work product.

5.22 Vendor Assurance of No Conflict of Interest or Detrimental Effect

All bidders responding to this solicitation should submit [Attachment 4](#) to attest that their performance of the services outlined in this RFP does not create a conflict of interest and that the bidder will not act in any manner that is detrimental to any other State project on which they are rendering services.

5.23 Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

The New York State Human Rights Law, Article 15 of the Executive Law, prohibits discrimination and harassment based on age, race, creed, color, national origin, sex, pregnancy or pregnancy-related conditions, sexual orientation, gender identity, disability, marital status, familial status, domestic violence victim status, prior arrest or conviction record, military status or predisposing genetic characteristics. In accordance with Executive Order No. 177, the Offeror certifies that they do not have institutional policies or practices that fail to address those protected status under the Human Rights Law.

6.0 PROPOSAL CONTENT

The following includes the format and information to be provided by each Bidder. Bidders responding to this RFP must satisfy all requirements stated in this RFP. All Bidders are requested to submit complete Administrative, Technical and Cost Proposals. A proposal that is incomplete in any material respect may be rejected.

To expedite review of the proposals, Bidders are requested to submit proposals in separate Administrative, Technical, and Cost packages inclusive of all materials as summarized in [Attachment A](#), Proposal Documents Checklist. This separation of information will facilitate the review of the material requested. No information beyond that specifically requested is required, and Bidders are requested to keep their submissions to the shortest length consistent with making a complete presentation of qualifications. Evaluations of the Administrative, Technical, and Cost Proposals received in response to this RFP will be conducted separately. Bidders are therefore cautioned not to include any Cost Proposal information in the Technical Proposal documents.

DOH will not be responsible for expenses incurred in preparing and submitting the Administrative, Technical, or Cost Proposals.

6.1 Administrative Proposal

The Administrative Proposal should contain all items listed below. A proposal that is incomplete in any material respect may be eliminated from consideration. The information requested should be provided in the prescribed format. Responses that do not follow the prescribed format may be eliminated from consideration. All responses to the RFP may be subject to verification for accuracy. Please provide the forms in the same order in which they are requested.

A. Bidder's Disclosure of Prior Non-Responsibility Determinations

Submit a completed and signed [Attachment 1](#), "Prior Non-Responsibility Determination."

B. Freedom of Information Law – Proposal Redactions

Bidders must clearly and specifically identify any portion of the proposal that a Bidder believes constitutes proprietary information entitled to confidential handling as an exception to the Freedom of Information Law. See [Section 5.11](#), ([Freedom of Information Law](#))

C. Vendor Responsibility Questionnaire

Complete, certify, and file a New York State Vendor Responsibility Questionnaire. DOH recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions at <http://www.osc.state.ny.us/vendrep/index.htm>.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the OSC Help Desk at 866-370-4672 or 518-408-4672 or by email at: ITServiceDesk@osc.state.ny.us.

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, or may contact the Office of the State Comptroller's Help Desk for a copy of the paper form. Bidders should complete and submit the Vendor Responsibility Attestation, [Attachment 3](#).

D. Vendors Assurance of No Conflict of Interest or Detrimental Effect

Submit [Attachment 4](#), Vendor's Assurance of No Conflict of Interest or Detrimental Effect, which includes information regarding the Bidder, members, shareholders, parents, affiliates or subcontractors. [Attachment 4](#) must be signed by an individual authorized to bind the Bidder contractually.

E. M/WBE Forms

Submit completed Form #1 and/or Form #2, Form #4 and Form #5 as directed in [Attachment 5](#), "Guide to New York State DOH M/WBE RFP Required Forms."

F. Encouraging Use of New York Businesses in Contract Performance

Submit [Attachment 6](#), "Encouraging Use of New York State Businesses" in Contract Performance to indicate which New York Businesses you will use in the performance of the contract.

G. Bidder's Certified Statements

Submit [Attachment 7](#), "Bidder's Certified Statements", which includes information regarding the Bidder. Attachment A must be signed by an individual authorized to bind the Bidder contractually. Please indicate the title or position that the signer holds with the Bidder. DOH reserves the right to reject a proposal that contains an incomplete or unsigned [Attachment 7](#) or no [Attachment 7](#).

H. References

Provide references using [Attachment 9](#), References for three (3) professional references. Provide firm names, addresses, contact names, telephone numbers, and email addresses.

I. Diversity Practices Questionnaire

The Department has determined, pursuant to New York State Executive Law Article 15-A, that the assessment of the diversity practices of respondents of this procurement is practical, feasible, and appropriate. Accordingly, respondents to this procurement should include as part of their response to this procurement, [Attachment 10](#) "Diversity Practices Questionnaire". Responses will be formally evaluated and scored.

J. Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination

Submit [Attachment 11](#) certifying that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law.

6.2 Technical Proposal

The purpose of the Technical Proposal is to demonstrate the qualifications, competence, and capacity of the Bidder to perform the services contained in this RFP. The Technical Proposal should demonstrate the qualifications of the Bidder and the staff to be assigned to provide services related to the services included in this RFP.

A Technical Proposal that is incomplete in any material respect may be eliminated from consideration. The following outlines the information requested to be provided, in the following order, by Bidders. The information requested should be provided in the prescribed format. Responses that do not follow the prescribed format may be eliminated from consideration. All responses to the RFP may be subject to verification for accuracy.

While additional data may be presented, the following should be included. Please provide the information in the same order in which it is requested. Your proposal should contain sufficient information to assure DOH of its accuracy. Failure to follow these instructions may result in disqualification.

Pricing information contained in the Cost Proposal cannot be included in the Technical Proposal documents.

A. Title Page

Submit a Title Page providing the RFP subject and number; the Bidder's name and address, the name, address, telephone number, and email address of the Bidder's contact person; and the date of the Proposal.

B. Table of Contents

The Table of Contents should clearly identify all material (by section and page number) included in the proposal.

C. Documentation of Bidder's Eligibility Responsive to Section 3.0 of RFP

Bidders must be able to meet all the requirements stated in [Section 3.1, Minimum Qualifications](#) of the RFP. The bidder must submit documentation that provides sufficient evidence of meeting the criterion. This documentation may be in any format needed to demonstrate how they meet the minimum qualifications to propose.

D. Technical Proposal Narrative

The technical proposal should provide satisfactory evidence of the Bidder's ability to meet each requirement in [Section 4.0, Scope of Work](#) and [Section 4.1, Tasks/Deliverables](#).

Bidder should respond to each element below and label each section by its corresponding number.

1. Describe your experience in developing web-based applications to collect and publish data. Include your approach to front-end displays that provide easy to understand information to the public and website development techniques that allow for expansion as the website needs change or grow.

2. Complete **Attachment P, Bidder's Proposed Technology Solution**, to provide adequate detail for a proposed technical solution meeting the specifications detailed in Section 4.1.1(a), (b) and (c) of the RFP.
3. Complete **Attachment R, Bidder's Security Proposal** to describe how their proposed solution complies with any applicable policies, standards, laws and rules, including but not limited to all policies and standards defined in the New York State ITS security policies and standards, <https://its.ny.gov/eiso/policies/security> and issues highlighted in the attachment.
4. Describe your plan for maximizing the user's experience with the interface of both the public web site and the physician self-reporting application in order to prevent frustration and facilitate the completion of the user's task.
5. Describe your experience entering into licensing agreements for data and managing data from multiple sources. Include your experience managing complex back-end database development.
6. Explain your process for managing weekly and/or monthly data file updates from the SED, AMA and AOA
7. Describe your plan to use the data to produce the required communications described in [Section 4.1.2](#). Further, please detail the tracking mechanisms implemented and how you plan to follow through with the required subsequent mailings as outlined in these sections of the Scope of Work.
8. Detail a plan to responsibly and accurately data-enter the profiling data received in hard copy both timely and accurately, and all verification methods you propose to use in order to meet this goal. Explain the steps utilized to furnish each physician who submits a hardcopy of their initial profile with a review copy of the entered data. Further, provide detail as to how corrections are handled and the steps for the final copy of their information.
9. Provide a plan to furnish physicians with their medical malpractice data to be published on the public profile, prior to its publication. Please include steps to triage and serve letters to physicians for clarification, as needed. Finally, describe your plan to maintain and produce a monthly report to the Department regarding the aforementioned medical malpractice communications, requests, and underlying statistics.
10. Physicians with two or fewer settlement within a ten (10) year period are allowed to appeal settlement posting to their profile. Please describe how you plan to serve these physicians notice, track and process the appeals.
11. Explain the process you implemented to handle changes to the physician profile such as lapse in registration, removal, suspension or surrender (notation).
12. Explain your plan to provide and maintain the secure electronic storage space needed to house ten (10) years of data.
13. Describe your plan to sufficiently staff and operate a call center that includes a Physicians' Help Desk to answer questions from physicians and a separate Consumer Help-Line to answer individual profile questions. Include your experience or a subcontractor's experience in operating a call center. Please include details to address the current call volume of 1,500 – 2000 combined calls a month.

14. Provide staffing guidelines you would utilize to obtain adequate coverage to ensure quick and efficient customer service at the call center. Additionally, the capability to record messages for off-hour calls need to be maintained. Provide details as to how you would achieve this.

15. Detail your plan to incorporate call center staff training. This should include a plan to provide staff training for Profile, HCS, CAMU, and technical based questions. Additionally, detail your plan to produce and maintain an Operations manual as well as all system documentation.

16. Upon commencement of the takeover, it is important that sufficiently staffed and trained personnel are available. Please detail how you plan to ensure that the takeover activities are adequately staffed and those involved adequately trained for the transition. Further, describe how your plans to incorporate progress report generation into this part of the plan.

17. Describe how you plan to facilitate a successful takeover. As the new and current contractor, you will be responsible for providing an orderly and controlled transition training for any subsequent successor contractor. This includes planning, hands on training, providing materials, manuals, and availability of resources all detailed in [Section 4.3 Takeover and Turnover](#) of this RFP. Please describe how you would produce and implement this plan to ensure a smooth transition in the future.

6.3 Cost Proposal

Submit a completed and signed **Attachment B, Cost Proposal-Bid Submission**. The Cost Proposal shall comply with the format and content requirements as detailed in this document and in Attachment B. Failure to comply with the format and content requirements may result in disqualification.

The bid price is to cover the cost of furnishing all of the said services, including but not limited to travel, materials, equipment, profit and labor to the satisfaction of the Department of Health and the performance of all work set forth in said specifications.

The bidder must offer fixed prices on the Cost Proposal for the tasks described in Section 4.3 (l) and (m). Full payments shall be made by the State to the Contractor upon the Department’s review and determination that all milestones and deliverables relating to the knowledge transfer plan/turnover task have been properly achieved or furnished. Payment will not be made for the turnover task if the current Contractor is awarded the subsequent contract.

7.0 PROPOSAL SUBMISSION

A proposal consists of three distinct parts: (1) the Administrative Proposal, (2) the Technical Proposal, and (3) the Cost Proposal. The table below outlines the requested format for submission of each part. Proposals should be submitted Electronic Submission as prescribed below.

	Electronic Submission
Administrative Proposal	Email labeled “Administrative Proposal, Bidder’s Name, RFP 20050” containing a standard searchable PDF file with copy/read permissions only.
Technical Proposal	Email labeled “Technical Proposal, Bidder’s Name, RFP 20050” containing a standard searchable PDF file with copy/read permissions only.
Cost Proposal	Email labeled “Cost Proposal, Bidder’s Name, RFP 20050” containing standard searchable PDF file(s) with copy/read permissions only.

The PDFs must be submitted in three (3) **separate emails containing standard searchable, open and permission password protected, PDF** proposals to: OPMCFiscal@health.ny.gov.

with the subject “<**Type of Proposal Submission, Bidder name, RFP #20050**>

1. All electronic proposal submission should **be clearly page numbered on the bottom of each page with appropriate header and footer information.**
2. The body of the email should include the password to the file and contact information.
3. A font size of eleven (11) points or larger should be used.
4. In the event an electronic submission cannot be read by the Department, the Department reserves the right to request a hard copy and/or electronic resubmission of any unreadable files. Offeror shall have two (2) business days to respond to such requests and must certify the resubmission is identical to the original submission
5. Where signatures are required, the proposal should have a handwritten (wet ink) signature and be signed in blue ink. A scanned of the handwritten (wet ink) signature can be used for electronic submission in the PDF. The Department reserves the right to request hardcopy originals of all signature pages at any time.
6. The NYSDOH discourages overly lengthy proposals. Therefore, marketing brochures, user manuals or other materials, beyond that sufficient to present a complete and effective proposal, are not desired. Elaborate artwork or expensive paper is not necessary or desired. In order for the NYSDOH to evaluate proposals fairly and completely. Proposals should follow the format described in this RFP to provide all requested information. The Bidder should not repeat information in more than one section of the proposal. If information in one section of the proposal is relevant to a discussion in another section, the Bidder should make specific reference to the other section rather than repeating the information.
7. Audio and/or videotapes are not allowed. Any submitted audio or videotapes will be ignored by the evaluation team.

The entire proposal must be received by the NYSDOH, in three separate emails to the email account and format designated above, no later than the Deadline for Submission of Proposals specified in [Section 1.0](#) (Calendar of Events). Late bids will not be considered.

7.1 No Bid Form

Bidders choosing not to bid are requested to complete the No-Bid form [Attachment 2](#).

8.0 METHOD OF AWARD

8.1 General Information

DOH will evaluate each proposal based on the “Best Value” concept. This means that the proposal that best “optimizes quality, cost, and efficiency among responsive and responsible offerers shall be selected for award (State Finance Law, Article 11, §163(1)(j)).

DOH at its sole discretion, will determine which proposal(s) best satisfies its requirements. DOH reserves all rights with respect to the award. All proposals deemed to be responsive to the requirements of this procurement will be evaluated and scored for technical qualities and cost. Proposals failing to meet the requirements of this document may be eliminated from consideration. The evaluation process will include

separate technical and cost evaluations, and the result of each evaluation shall remain confidential until evaluations have been completed and a selection of the winning proposal is made.

The evaluation process will be conducted in a comprehensive and impartial manner, as set forth herein, by an Evaluation Committee. The Technical Proposal and compliance with other RFP requirements (other than the Cost Proposal) will be weighted **60%** of a proposal's total score and the information contained in the Cost Proposal will be weighted **40%** of a proposal's total score.

Bidders may be requested by DOH to clarify the contents of their proposals. Other than to provide such information as may be requested by DOH, no Bidder will be allowed to alter its proposal or add information after the Deadline for Submission of Proposals listed in [Section 1.0 \(Calendar of Events\)](#).

In the event of a tie, the determining factor for award will be:

The tied bidders will be given the opportunity to provide their best and final bid price to the Department, and after evaluation of these revised bids, the award will then be made to the lowest bidder that meet all of the specifications.

8.2 Submission Review

DOH will examine all proposals that are received in a proper and timely manner to determine if they meet the proposal submission requirements, as described in [Section 6.0 \(Proposal Content\)](#) and [Section 7.0 \(Proposal Submission\)](#), including documentation requested for the Administrative Proposal, as stated in this RFP. Proposals that are materially deficient in meeting the submission requirements or have omitted material documents, in the sole opinion of DOH, may be rejected.

8.3 Technical Evaluation (60%)

The evaluation process will be conducted in a comprehensive and impartial manner. A Technical Evaluation Committee comprised of program staff of DOH will review and evaluate all proposals.

Proposals will undergo a preliminary evaluation to verify Minimum Qualifications to Propose,

The Technical Evaluation Committee members will independently score each Technical Proposal that meets the submission requirements of this RFP. The individual Committee Member scores will be averaged to calculate the Technical Score for each responsive Bidder.

The technical evaluation is **60%** of the final score.

8.4 Cost Evaluation (40%)

The Cost Evaluation Committee will examine the Cost Proposal documents. The Cost Proposals will be opened and reviewed for responsiveness to cost requirements. If a cost proposal is found to be non-responsive, that proposal may not receive a cost score and may be eliminated from consideration.

Each proposal that meets the submission requirements and meets the cost proposal requirements will receive a cost score. The Cost Proposals will be scored based on a maximum cost score of 40 points. The maximum cost score will be allocated to the proposal with the lowest all-inclusive not-to-exceed

maximum price. All other responsive proposals will receive a proportionate score based on the relation of their Cost Proposal to the proposals offered at the lowest final cost, using this formula:

$$C = (A/B) * 40\%$$

A is Total price of lowest cost proposal;

B is Total price of cost proposal being scored; and

C is the Cost score.

The cost evaluation is **40%** of the final score.

8.5 Composite Score

A composite score will be calculated by the DOH by adding the Technical Proposal points and the Cost points awarded. Finalists will be determined based on composite scores.

8.6 Reference Checks

The Bidder should submit three (3) references for previous clients for whom they have maintained a public web site or developed a web-based application using [Attachment 9](#) (References). At the discretion of the Evaluation Committee, references may be checked at any point during the process to verify bidder qualifications to propose (Section 3.0).

8.7 Best and Final Offers

NYSDOH reserves the right to request best and final offers. In the event NYSDOH exercises this right, all bidders that submitted a proposal that are susceptible to award will be asked to provide a best and final offer. Bidders will be informed that should they choose not to submit a best and final offer, the offer submitted with their proposal will be construed as their best and final offer.

8.8 Award Recommendation

The Evaluation Committee will submit a recommendation for award to the Finalist(s) with the highest composite score(s) whose experience and qualifications have been verified.

The Department will notify the awarded Bidder and Bidders not awarded. The awarded Bidder will enter into a written Agreement substantially in accordance with the terms of [Attachment 8](#), DOH Agreement, to provide the required services as specified in this RFP. The resultant contract shall not be binding until fully executed and approved by the New York State Office of the Attorney General and the Office of the State Comptroller.

9.0 ATTACHMENTS

The following attachments are included in this RFP and are available via hyperlink or can be found at: <https://www.health.ny.gov/funding/forms/>.

1. [Bidder's Disclosure of Prior Non-Responsibility Determination](#)
2. [No-Bid Form](#)
3. [Vendor Responsibility Attestation](#)
4. [Vendor Assurance of No Conflict of Interest or Detrimental Effect](#)
5. [Guide to New York State DOH M/WBE Required Forms & Forms](#)
6. [Encouraging Use of New York Businesses in Contract Performance](#)
8. [DOH Agreement \(Standard Contract\)](#)
9. [References](#)
10. [Diversity Practices Questionnaire](#)
11. [Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination](#)

The following attachments are included in this RFP:

7. [Attachment 7- Bidder's Certified Statements](#)
- A. [Attachment A-Proposal Document Checklist](#)

The following attachments are included in this RFP and can be found at: <https://www.health.ny.gov/funding/>.

- B. Attachment B-Cost Proposal-Bid Submission Formc.xlsx
- J. Attachment J-NYPP Newsletter_June2021.docx
- K. Attachment K-Monthly-Annual Reporting Requirements.pdf
- L. Attachment L-Public Health Laws and Regulations.pdf
- M. Attachment M-Profile Data Sources.pdf
- N. Attachment N-Physician Survey.pdf
- O1. Attachment O-1 Data Dictionary.xlsx
- O2. Attachment O-2 Database Manual.docx
- P. Attachment P- Bidder's Proposed Technology Solution.pdf
- Q. Attachment Q-Security Requirements.pdf
- R. Attachment R- Bidder's Security Proposal.pdf
- S. Attachment S-Operation Manual.pdf

Please note: Attachment C through Attachment I are not being used for this procurement

**ATTACHMENT 7
 BIDDER'S CERTIFIED STATEMENTS**

To be completed and included in the Administrative Proposal documents

RFP # 20050 New York State Physician Profile
1. Information with regard to the Bidder
A. Provide the Bidder's name, address, telephone number, and fax number.
Name: Click here to enter text.
Address: Click here to enter text.
City, State, ZIP Code: Click here to enter text.
Telephone Number (including area code): Click here to enter text.
Fax Number (including area code): Click here to enter text.
B. Provide the name, address, telephone number, and email address of the Bidder's Primary Contact with DOH with regard to this proposal.
Name: Click here to enter text.
Address: Click here to enter text.
City, State, ZIP Code: Click here to enter text.
Telephone Number (including area code): Click here to enter text.
Email Address: Click here to enter text.
2. By submitting the bid the Bidder acknowledges and agrees to all of the following: [Please note that alterations of any language contained in this section may render your proposal non-responsive.]
Bidder certifies that either there is no conflict of interest or that there are business relationships and /or ownership interests for the organization for the above named organization that may represent a conflict of interest for the organization as a bidder and attached to this form is a description of how the potential conflict of interest and/or disclosure of confidential information relating to this contract will be avoided.
The Bidder certifies that it can and will provide and make available, at a minimum, all services as described in the RFP if selected for award.
Bidder acknowledges that, should any alternative proposals or extraneous terms be submitted with the proposal, such alternate proposals or extraneous terms will not be evaluated by the DOH.
Bidder accepts, without any added conditions, qualifications or exceptions, the contract terms and conditions contained in this RFP including any exhibits and attachments.

The bidder is either registered to do business in NYS, or if formed or incorporated in another jurisdiction than NYS, can provide a Certificate of Good Standing from the applicable jurisdiction or provide an explanation, subject to the sole satisfaction of the Department, if a Certificate of Good Standing is not available, and if selected, the vendor will register to do business in NYS.

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies its own organization, under penalty of perjury, that the bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of section two hundred one-g of the labor law.

A. The Bidder is (check as applicable):

- A New York State Certified Minority-Owned Business Enterprise
- A New York State Certified Woman-Owned Business Enterprise
- A New York State Certified Minority and Woman-Owned Business Enterprise (Dual Certified)
- None of the above

B. Provide the name, title, address, telephone number, and email address of the person authorized to receive Notices with regard to the contract entered into as a result of this procurement. See Section M of the DOH Agreement (Attachment 8), NOTICES.

Name: Click here to enter text.

Title: Click here to enter text.

Address: Click here to enter text.

City, State, ZIP Code: Click here to enter text.

Telephone Number (including area code): Click here to enter text.

Email Address: Click here to enter text.

C. Bidder's Taxpayer Identification Number:

Click here to enter text.

D. Bidder's NYS Vendor Identification Number as discussed in Section 6.1.B, if enrolled:

Click here to enter text.

By my signature on this Attachment A, I certify to the statements made above in Section 2 and that I am authorized to bind the Bidder contractually. Furthermore, I certify that all information provided in connection with its proposal is true and accurate.

Typed or Printed Name of Authorized Representative of the Bidder

Title/Position of Authorized Representative of the Bidder

Signature of Authorized Representative of the Bidder

Date

**ATTACHMENT A
PROPOSAL DOCUMENT CHECKLIST**

Please reference Section 7.0 for the appropriate format and quantities for each proposal submission.

RFP# 20050 New York State Physician Profile		
FOR THE ADMINISTRATIVE PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.1 A.	Attachment 1 – Disclosure of Prior Non-Responsibility Determinations, completed and signed.	<input type="checkbox"/>
§ 6.1 B.	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1 C.	Attachment 3- Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1 D.	Attachment 4- Vendor’s Assurance of No Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1 E.	MWBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 Form 1	<input type="checkbox"/>
	Attachment 5 Form 2 (If Applicable)	<input type="checkbox"/>
	Attachment 5 Form 4	<input type="checkbox"/>
	Attachment 5 Form 5	<input type="checkbox"/>
§ 6.1 F.	Attachment 6 - Encouraging the Use of New York State Business	<input type="checkbox"/>
§ 6.1 G.	Attachment 7 - Bidder’s Certified Statements	<input type="checkbox"/>
§ 6.1 H.	Attachment 9- References	<input type="checkbox"/>
§ 6.1 I.	Attachment 10- Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1 J.	Attachment 11- Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
FOR THE TECHNICAL PROPOSAL		
RFP §	SUBMISSION	INCLUDED
§ 6.2 A.	Title Page	<input type="checkbox"/>
§ 6.2 B.	Table of Contents	<input type="checkbox"/>
§ 6.2 C.	Documentation of Bidder’s Eligibility	<input type="checkbox"/>
§ 6.2 D.	Technical Proposal Narrative	<input type="checkbox"/>
FOR THE COST PROPOSAL		
RFP §	REQUIREMENT	INCLUDED
§ 6.3	Attachment B- Cost Proposal	<input type="checkbox"/>