



## **REQUEST FOR PROPOSALS**

### **Hyperbaric Oxygen Treatment and Wound Care Services**

**RFP #: WHN-C-0023**

**RFP Issue Date: August 21, 2017**  
**Proposal Due Date: September 22, 2017**

**WESTCHESTER MEDICAL CENTER HEALTH NETWORK**

**WESTCHESTER MEDICAL CENTER**  
**Executive Offices at Taylor Pavilion**  
**Office of Legal Affairs**  
**100 Woods Road**  
**Valhalla, New York 10595**

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	To provide a mechanism for vendors who do business with WMC to be appropriately reimbursed for travel and expenses as it relates to WMC. ....	24

**Attachments**

- Attachment A – WMCHHealth Definitions and Standard Terms and Conditions
- Attachment B – Travel and Expense Policy for Vendors
- Attachment C – Vendor Debarment/Exclusion Questionnaire
- Attachment D – Disclosure of Prior Non-Responsibility Determinations
- Attachment E – State Finance Law Affirmation
- Attachment F – M/WBE and EEO Compliance Documentation Forms
- Attachment G– Diversity Practices Questionnaire

## 1. Introduction and Background

### 1.1 Purpose of the Request for Proposals

The WMCHHealth Network (“WMCHHealth”) is issuing this Request for Proposals (“RFP”) to invite qualified firms to submit proposals to perform Hyperbaric Oxygen Treatment and Wound Care Services throughout WMCHHealth. A detailed description of the Hyperbaric Oxygen Treatment and Wound Care Services is set forth in Section 4 “Scope of Services”.

All prospective RFP respondents will submit proposals to provide services at the following sites:

- |   |   |
|---|---|
| 1. Westchester Medical Center<br>100 Woods Road<br>Valhalla, NY 10595   | 4. Bon Secours Community Hospital<br>(including St. Joseph’s Place)<br>160 E Main Street<br>Port Jervis, NY 12771 |
| 2. MidHudson Regional Hospital<br>Of Westchester Medical Center<br>241 North Road<br>Poughkeepsie, New York 12601 | 5. St. Anthony’s Community Hospital<br>15 Maple Avenue<br>Warwick, NY 10990                                       |
| 3. Good Samaritan Hospital of Suffern<br>255 Lafayette Avenue<br>Suffern, NY 10901                                | 6. HealthAlliance Hospital – Broadway Campus<br>396 Broadway<br>Kingston, NY 12401                                |

### 1.2 Background

#### WMCHHealth Network

The Westchester Medical Center Health Network (WMCHHealth) is a 1,900-bed healthcare system headquartered in Valhalla, New York, with 10 hospitals on eight campuses spanning 6,200 square miles of the Hudson Valley. WMCHHealth employs more than 12,000 people and has nearly 3,000 attending physicians. From Level 1, Level 2 and Pediatric Trauma Centers, the region’s only acute care children’s hospital, an academic medical center, several community hospitals, dozens of specialized institutes and centers, skilled nursing, assisted living facilities, homecare services and one of the largest mental health systems in New York State, today WMCHHealth is the pre-eminent provider of integrated healthcare in the Hudson Valley.

Westchester Medical Center Health Network includes the flagship, Westchester Medical Center, Maria Fareri Children’s Hospital and Behavioral Health Center in Valhalla, New York; MidHudson Regional Hospital in Poughkeepsie, New York; Good Samaritan Hospital in Suffern, New York; Bon Secours Community Hospital in Port Jervis, New York; St. Anthony Community Hospital in Warwick, New York; HealthAlliance Hospital-Broadway Campus in Kingston, New York; HealthAlliance Hospital-Mary’s Avenue Campus, in Kingston, New York; and Margaretville Hospital in Margaretville, New York. (WMCHHealth and each of its component entities may be hereinafter referred to as “WMCHHealth” or the “Corporation”).

#### Westchester Medical Center (WMC) & MidHudson Regional Hospital of Westchester Medical Center (MHRH).

##### Overview

Westchester Medical Center is operated by Westchester County Health Care Corporation, a public benefit corporation established by the New York State Legislature pursuant to Article 10-C of the New York Public Authorities Law. On January 1, 1998, the facilities and operations of the Westchester County Department of Hospitals were transferred to Westchester County Health Care Corporation, which is now responsible for the programs, services, and operations of the medical center. As a public hospital, WMC’s primary mission is to provide high-quality advanced health services to the residents of the Hudson Valley and the surrounding area, regardless of their ability to pay.

WMC is a regional, tertiary level academic medical center, composed of University Hospital, Maria Fareri Children’s Hospital at Westchester Medical Center, and the Behavioral Health Center in Valhalla, New York as well as MidHudson Regional Hospital of Westchester Medical Center in Poughkeepsie, New York. WMC serves as the Hudson Valley’s most advanced

medical care and referral hospital, serving a population of more than 3.5 million people. WMC’s Valhalla campus is licensed to operate with a total of 652 patient beds, including 415 beds in University Hospital; 136 beds in the Maria Fareri Children’s Hospital at Westchester Medical Center; and 101 beds in the Behavioral Health Center that provides inpatient and outpatient psychiatric care. MHRH is licensed to operate 243 patient beds.

**Bon Secours Charity Health System.**

Overview

Bon Secours Charity Health System (BSCHS) is a multi-state healthcare provider serving nearly a million people in the lower Hudson Valley, New Jersey and Pennsylvania. BSCHS has received national recognition, rankings and numerous awards for the level of care it provides including Distinguished Hospital Award for the top 100 hospitals by HealthGrades and Truven’s Top 100 Hospitals for Cardiac Surgery.

BSCHS is comprised of Good Samaritan Hospital in Suffern, New York; Bon Secours Community Hospital in Port Jervis, New York; St. Anthony Community Hospital in Warwick, New York; a certified home health agency; two long-term care facilities; an assisted living/adult home facility; and several other medical programs located throughout the region. Mount Alverno Center is a New York State-licensed Adult Home with an Assisted Living Program serving 85 residents. Schervier Pavilion is a 120-bed, skilled nursing facility dedicated to the highest standard of healthcare excellence.

**HealthAlliance of the Hudson Valley.**

Overview

HealthAlliance of the Hudson Valley (HAHV) is an integrated health care system committed to providing quality and compassionate medical care for our patients, their families and our community. HAHV is dedicated to offering a full range of services and medical options, while strengthening the quality of its patients’ health care.

The HealthAlliance of the Hudson Valley system is comprised of Mary’s Avenue Campus, Broadway Campus, Margaretville Hospital, Mountainside Residential Care Center and Woodland Pond at New Paltz.

HealthAlliance of the Hudson Valley is planned to undergo a consolidation, whereby a new bed tower will be constructed on its Mary’s Avenue Campus. The Broadway Campus will transform into a medical village that will focus on outpatient services. This is expected to be completed, tentatively, by 2019.

**2. RFP Instructions**

**2.1 General Instructions**

Prospective Respondents should read this entire document. The Respondent must complete all sections of this RFP and sign where indicated. Submission of this RFP represents acceptance of all terms, conditions and prices contained herein.

**2.2 RFP Questions and Clarifications**

All questions or requests for clarification concerning the RFP shall be submitted in writing or via e-mail to the Designated Contact(s) by **August 28, 2017**. No questions or requests for clarification will be accepted by telephone. Questions submitted by vendors and all Corporation’s responses will be distributed to all prospective proposers.

**2.3 Key Events/Timeline**

Event	Date and Time
RFP Release	8/21/17
Questions and Requests for Clarification Due	8/28/17
Questions and Answers Distributed	9/8/17

<b>Proposal Due Date</b>	9/22/17
<b>Finalist Presentations</b>	10/18/17 at designated times
<b>Anticipated Notice of Tentative Award</b>	10/25/17
<b>Anticipated Contract Start Date</b>	5/1/18

## 2.4 Submission of Proposal

**PROPOSERS MUST EMAIL THEIR PROPOSAL NO LATER THAN 4:00 PM EASTERN STANDARD TIME ON September 22, 2017 TO THE DESIGNATED CONTACTS IDENTIFIED IN SECTION 2.5.** Proposals received after this time and date will not be considered. The Corporation is not responsible for any internal or external delivery delays that may cause a proposal to arrive after the deadline.

## 2.5 Designated Contacts

State Finance Law Sections 139-j and 139-k (the "Procurement Requirements") restrict communications between THE CORPORATION and vendors responding to RFPs. EXCEPT AS OUTLINED BELOW, FROM THE DATE THIS RFP IS ISSUED UNTIL THE TENTATIVE AWARD AND APPROVAL OF ANY CONTRACT (THE "RESTRICTED PERIOD") ALL COMMUNICATIONS BETWEEN VENDORS AND THE CORPORATION REGARDING THIS RFP, MUST BE CONDUCTED ONLY WITH REPRESENTATIVES IDENTIFIED BY THE CORPORATION AS "DESIGNATED CONTACTS."

The Designated Contacts for this RFP are:

**Karen D. Berger**  
**Vice President, Transplant and Clinical Services**  
**100 Woods Road**  
**Valhalla, New York 10595**  
[Karen.Berger@WMCHHealth.org](mailto:Karen.Berger@WMCHHealth.org)

**Patrice A. Gordon-Poyser**  
**Senior Corporate Contract Coordinator**  
**100 Woods Road**  
**Valhalla, NY 10595**  
[Patrice.Gordon@wmchealth.org](mailto:Patrice.Gordon@wmchealth.org)

### A. Exceptions: Permissible Contacts

In certain limited circumstances, it is permissible for vendors to communicate with CORPORATION representatives other than the Designated Contacts about the RFP. These Permissible Contacts include:

- Submission of written proposals;
- Written complaints by a prospective vendor to Corporation's General Counsel regarding the failure of Corporation to timely respond to authorized contacts by vendors;
- Participation in RFP conferences or interviews;
- Negotiations following the tentative award of a contract;
- Requests to review the award of a contract; and
- Legal or administrative proceedings regarding the award of a contract.

### B. Record of Contacts.

As required by § 139-k of the State Finance Law, WMCHHealth will record information about contacts with vendors during the Restricted Period. Information recorded by Corporation will include but not be limited to the name, address, telephone number, place of principal employment, and occupation of the person or entity making the contact. All recorded information concerning contacts made during the Restricted Period will become part of the procurement record for this RFP.

### **C. Responsibility of Proposer.**

WMCHealth will review whether vendors' contacts with WMCHealth were made in accordance with the terms of this Section 2.5 or otherwise qualify as a Permissible Contact under the State Finance Law. A finding that a vendor has knowingly and willfully violated the terms of State Finance Law §§ 139-j and 139-k may result in a determination that such vendor is not a "responsible" proposer. Such a determination will be considered by Corporation in its assessment of whether a vendor is qualified to perform the services described in this RFP.

### **D. Disclosure of Non-Responsibility.**

All proposers must disclose to Corporation, on the Disclosure of Prior Non-Responsibility Determinations Form attached hereto as **Attachment D**, any finding of non-responsibility made by a governmental entity within the previous four (4) years based on either impermissible contacts under § 139-j of the State Finance Law or the intentional provision of false or incomplete information to a governmental entity. Failure of any proposer to timely disclose a finding of non-responsibility or the submission of any intentionally false or incomplete information may result in the rejection of a proposal, the cancellation of a contract award, or if such contract has been executed, the immediate termination of the contract.

### **E. Written Affirmation.**

Each proposer must submit a written affirmation, in the form attached hereto as **Attachment E**, as to the proposer's understanding and agreement to comply with Corporation's procedures relating to Permissible Contacts. The affirmation must be completed and signed by a corporate officer or Principal of the proposer. Proposals that do not contain a signed original affirmation will be rejected.

## **2.6 Addenda to RFP**

In the event it becomes necessary to revise any part of this RFP or extend any deadline listed herein, the Corporation will issue an addendum to the RFP and distribute it to all known prospective proposers.

## **2.7 Cost of Proposals**

Proposers shall not be reimbursed for any costs or expenses incurred in the preparation or submission of proposals or the attendance of RFP conference or interview. All costs associated with a proposer's response to this RFP shall be borne by the proposer.

## **2.8 Proposal Format and Content**

Proposals should provide a straightforward complete and concise description of the vendor's capabilities to satisfy the requirements of the RFP. Proposals must state the assumptions made when preparing the proposal. Proposals must include the following sections:

- **Title Page:** The title page should show the proposed title, name of the proposer, its address, the name and title of the contact person, the name and title of the person authorized to represent the proposer and the date.
- **Table of Contents:** The table of contents in the proposal should clearly identify all items of the proposal by question number and page number.
- **Transmittal Letter:** A transmittal letter, which shall be considered an integral part of the proposal, shall be signed by the individual or individuals authorized to bind the firm contractually. An unsigned proposal may be rejected. The letter shall include:
  - o Indication that the signer is so authorized to sign the proposal and the contract, and the title or position the signer holds in the proposer's firm.
  - o If the signer is not the contact person identified on the title page, also include the address and telephone number of the authorized signatory.
  - o A statement as to the willingness of the proposer's firm to enter into a contractual agreement containing, at a minimum, the terms and conditions set forth in **Attachment A** of this RFP. In accordance with Section 6 of this RFP, any exceptions to these terms and conditions must be explicitly stated in a separate section of this proposal.

- Executive Summary: A concise (no more than one page) summary of the key points, including which services detailed in the Scope of Services are included in the proposal.

In addition, proposals must contain the following:

A. Proposer's Background and Experience

1. Provide a history and background description of the proposer's firm including, but not limited to, the date the company was organized and, if proposer is a corporation, when and where it was incorporated.
2. Please provide a profile of the firm including:
  - i. A brief description of the full range of services provided by your firm;
  - ii. The total number of offices of the firm, the addresses of each, and the total number of employees;
  - iii. The location of the office from which the services to be provided under this engagement are to be managed and the number of personnel employed at such office;
  - iv. List of all former and current clients for the past 3 years;
  - v. Scope of services provided to each client identified in question iv above;
3. Name, Address, Telephone number Fax number and Website (if applicable) of firm.
4. Contact person(s) (including e-mail address(es)).
5. A brief history of the firm, its healthcare experience and its length of time in operation.
6. A list of the principals to be used on this engagement including project role.
7. Include a copy of firm's most recent financial statement.

B. Experience: Please provide details of the firm's experience including:

1. Any other projects of similar scope and complexity as this project.
2. References, with the names of the contact person, address, and telephone numbers for at least three healthcare clients for which your firm has provided similar services.
3. Specific experience in healthcare, including a description of the size and nature of such projects.

C. Staffing Proposal: A staffing proposal that includes a list of staff who will participate in the project, showing the role of each and their level of effort and qualifications.

1. Justification of staffing proposal.
2. Customer service training (initial and on-going) provided.
3. Metrics used to ensure best-in-class service.

D. Fee Proposal: The fee proposal must be submitted in the proposer's package in a separate, clearly marked, document. Although proposed fees will be taken into account, WMCHHealth reserves the right to negotiate a lower or different fee structure with any proposer that is tentatively selected. The fee proposal must include an analysis, in as much detail as possible, of the components of compensation you propose to receive in connection with your provision of services under this RFP with subtotals by task and phase of work.

E. Additional Information: Why should your firm be selected? What can you do for the Corporation that other firms cannot? Please include any other information about your firm that can answer these questions.

F. Conflicts of Interest:

1. A statement describing any financial interest of any employee, officer, or director of, and physician or physician practice affiliated with, the Corporation in proposer's firm. A "financial interest" shall include the following transactions or relationships: (a) payment of fees including consulting fees, royalty fees, honoraria, or other emoluments or "in kind" compensation; (b) any gift of more than nominal value; (c) service as an officer or director of vendor whether or not remuneration is received for such service; or (d) an ownership interest in vendor, except that a shareholder owning less than a majority of shares of a publicly traded entity shall not be deemed to have a financial interest.
2. A statement describing any potential conflict of interest or appearance of impropriety, relating to other clients of proposer's firm, or employees of the Corporation or New York Medical College, that could be created by providing services to the Corporation.
3. Indicate whether any owner, officer, or employee of proposer's firm has served as an officer of, or has been employed by the Corporation or its affiliates during the previous twelve (12) month period.
4. Indicate what procedures will be followed to detect and notify the Corporation of, and to resolve any conflicts of interest.
5. Indicate any pending litigation and/or regulatory action brought by any oversight body or entity that could have an adverse material impact on the proposing firm's ability to serve the Corporation.
6. Indicate if the firm has ever, under current or previous corporate names: a) had a contract with any governmental entity terminated for any reason, and if so, provide an explanation and/or b) received any governmental or regulatory criminal or civil sanctions, the circumstances, and how they were resolved.
7. Attached Forms: All proposals must include completed copies of the forms annexed hereto as **Attachments C, D, E, F and G.**

### 3. RFP Award

#### 3.1 Method of Award

The award will be made on the basis of best value (the proposal which optimizes quality, cost, and efficiency) to the most responsive and responsible proposer as determined in the evaluation process. The contract will not be awarded solely on the basis of lowest cost. Instead, the award will be made to the respondent(s) whose proposal receives the highest overall evaluation score based on the criteria stated herein, which includes, but is not limited to:

- Customer Service focus, metrics, training.
- Proven track record.
- Ability to meet or exceed scope of services.
- References.
- Fee Proposal.

All proposals received in accordance with this RFP will be reviewed and evaluated. Incomplete proposals and proposals that do not meet the minimum requirements in the discretion of Corporation including, but not limited to, conflicts of interest, will be rejected.

Proposers may be requested by the Corporation to clarify contents of their proposals. Other than to provide such information as may be requested by the Corporation including, but not limited to, best and final offers, no proposer will be allowed to alter its proposal or add new information after the final submission date and time.



#### 4. Scope of Services

##### WMCValhalla's Current Wound Care and Hyperbaric Oxygen Treatment Scope of Work

WMCValhalla currently has an arrangement through which a vendor provides certain personnel, administrative, and technical services, as well as certain equipment in connection with the provision of wound care (WC) and hyperbaric oxygen treatment (HBOT) services to inpatients and outpatients as ordered by a physician (collectively the "Services"). Services include vendor's provision of staff, patient scheduling, insurance verification and precertification, provision of on-call coverage for every weeknight, weekend, and holiday, provision and maintenance of policy and procedure documents and operational forms as required by WMCValhalla's records committee, assistance with preparation of annual cost center budgets and necessary tracking of actual results, maintenance of appropriate forms and documents within the unit consistent with standards and requirements of DNV and Undersea Hyperbaric Medical Society national accreditation, assistance with the Quality Assurance Program for the Services, and submission of necessary reports. The vendor is directly responsible for paying its employees' wages and other compensation, reimbursement of expenses, fees, and compliance with Federal, State and local withholding requirements pertaining to taxes, workers' compensation, disability, Social Security, unemployment compensation, and other insurance requirements and obligations imposed by law with regards to the individuals who furnish Services pursuant to the arrangement and who are deemed to be employees and agents of vendor. Vendor performs community outreach and education services with community physicians to increase awareness of the Services at WMCValhalla. Vendor also assists and advises WMCValhalla with development of strategies to enhance opportunities to participate in managed care contracts for HBOT.

At its sole cost and expense, vendor arranged for IV pumps capable for hyperbaric use, Transcutaneous Oxygen Monitoring (TCOM) equipment, unit entertainment equipment, unit administrative computer with relevant software, four (4) hyperbaric chambers, four (4) chamber specific gurneys, two (2) air conditioning systems, and two (2) gas control panels to operate four chambers. Vendor is solely responsible for the maintenance and repair of the aforementioned equipment.

WMCValhalla compensates vendor an annual fee that is payable in twelve (12) equal installments within ninety (90) days of receipt of monthly invoices. The Annual Fee includes twelve (12) emergency visits per calendar quarter to WMCValhalla by vendor's employees while on-call ("On-Call Visits"). "On-Call" refers only to weeknights (4:01 PM to 7:59 AM), weekends, and holidays during which vendor's employees carry a beeper and are obligated to be available to come to WMCValhalla in an emergency. If the number of On-Call Visits in any calendar quarter exceeds twelve (12), WMCValhalla pays vendor a separate fee for each On-Call Visit. The annual fee also includes payment for up to one hundred (100) inpatient or outpatient HBOT treatments per calendar month during normal operating hours (8:00 AM to 4:00 PM). If the number of treatments during normal operating hours in any calendar month exceeds one hundred (100), WMCValhalla pays vendor a fee for each treatment above the one hundred visit threshold.

WMCValhalla does not have a formal outpatient wound care program at this time. Below is the HBOT treatment data for WMCValhalla:

Year	Number of Patients	HBOT
2015	122	1,037
2016	72	689
*2017	82	688

*\*Extrapolated for full year*

MidHudson Regional Hospital’s Current Wound Care and Hyperbaric Oxygen Treatment Scope of Work

MidHudson Regional Hospital currently has an arrangement through which a vendor provides hyperbaric oxygen and wound care related equipment (the “Equipment”) and administrative and consultative services (the “Services”) to, or on behalf of, MidHudson Regional Hospital. The vendor installed at its sole expense, a Hyperbaric Oxygen Therapy Treatment Facility, which consists of three (3) monoplace hyperbaric oxygen chambers (“HBO Chambers”) and ancillary equipment sufficient to treat one person in each chamber at one time with the option to add additional HBO Chambers should doing so be warranted based upon patient demand for HBO treatment. The vendor also, at its sole cost and expense, maintains the HBO Chambers and Equipment in good condition consistent with manufacturer specifications by keeping effective maintenance agreements to ensure preventative maintenance and timely repairs. The vendor also, at its sole cost and expense, installed oxygen measurement devices as necessary to provide the hyperbaric treatment. The vendor also provided all furniture for the Facility.

The vendor is responsible for all salary and related expenses for the non-physician staff required to provide the Services. The vendor is responsible for income tax, unemployment insurance, social security, or any other withholding or other employee benefits as is required by law or other regulations by any governmental body for the individuals employed by the vendor. Staff provided by vendor includes nursing and non-professional persons employed by the vendor or an affiliated entity to use and maintain equipment and to provide other professional and non-professional services including, without limitation, nursing, consultative, technical and administrative services, on behalf of MidHudson Regional Hospital. The vendor assists MidHudson Regional Hospital with establishing minimum requirements and training courses (collectively, the “Programs”) to help MidHudson Regional Hospital ensure that only qualified personnel are used in connection with the provision of the Services and the Professional Services. The vendor provides necessary training, as required by MidHudson Regional Hospital, which includes training services provided to treating staff.

The vendor consults and assists MidHudson Regional Hospital with billing and collections for the technical component of hyperbaric and wound care treatment rendered to patients. The staff is required to maintain and provide to MidHudson Regional Hospital a monthly schedule detailing all treatments rendered at the facility. At the sole cost and expense of the vendor, vendor is responsible for obtaining preauthorization of patients with all forms of insurance or with no insurance, including Medicaid and Medicare.

MidHudson Regional Hospital compensates the vendor for the use of the Chamber and to cover the Services provided in connection with each hyperbaric procedure.

Below is the wound care and HBOT treatment data for MidHudson Regional Hospital:

Type	# Patients 2015	# Treatments 2015	# Patients 2016	# Treatments 2016	# Patients 2017*	# Treatments 2017*
Wound Care	360	4,824	356	5,501	266	5482
HBOT	46	1,595	43	1,542	26	1840

*\*Extrapolated for full year*

Bon Secours Charity Health System’s Current Wound Care and Hyperbaric Oxygen Treatment Scope of Work

Good Samaritan Hospital currently has an arrangement through which a vendor provides and operates Hyperbaric Oxygen Therapy Equipment (“HBO Equipment”) and provides related administrative services to and on behalf of Good Samaritan Hospital (collectively, “HBO Services”). At its sole cost and expense, the vendor installed a minimum of two (2) monoplace air conditioned and computer controlled hyperbaric oxygen chambers and ancillary equipment. The vendor, at its sole cost and expense, keeps the HBO Equipment and Furnishings in good condition and working order consistent with all manufacturer specifications and applicable laws, regulations and accreditation requirements. The

vendor also, at its sole cost and expense, keeps in effect maintenance agreements to ensure necessary preventative maintenance and timely repairs for the HBO Equipment so that the HBO Equipment is returned to operation within the later of the next twenty-four (24) hours or within the next successive twelve (12) hours of scheduled operation for HBO Services. HBO Services are provided Monday through Friday from 8:00 AM to 4:00 PM and Saturday 8:00 AM to 12:00 noon, excluding Good Samaritan Hospital holidays.

The vendor was required to provide five (5) days of in-service HBO Treatment training (40-hour course) for up to four (4) Good Samaritan Hospital physicians and nursing staff at a vendor training facility in the first year of operation. The vendor was also required to retain a physician to provide consulting services for one day on-site at Good Samaritan Hospital to assist in HBO Treatment Startup. The vendor was required to provide a lecture in Chart Documentation for Good Samaritan physicians and nurses. The vendor conducts chart reviews / written comments as reasonably requested by Good Samaritan. The vendor provides on-site monthly safety inspections and staff safety meetings per NFPA-99 Healthcare Facilities. The vendor is required to retain and provide to Good Samaritan Hospital the following staff deemed necessary to provide the administrative services and to operate the HBO Equipment:

- One and one half full time administrative personnel responsible for the general administration and billing support relating to the provision of HBO Services and Wound Care Support.
- One full time National Board Certified Hyperbaric Technologist to be employed in the capacity of supervisor (the "Supervising CHT"). The Supervising CHT is responsible for treatment scheduling, hyperbaric safety, patient care coordination, patient education and quality management, coordinating hyperbaric services and assuring consistent quality care for all patients receiving hyperbaric services. The Supervising CHT also serves as the on-site Hyperbaric Safety Director and in such capacity works with Good Samaritan's Safety Director and participates in monthly safety meetings.
- One full time Hyperbaric Technician who, under direction of the Supervising CHT and / or the Medical Director, acts as the outside attendant and chamber operator during clinical treatments using the HBO chambers.

The vendor will provide an on-site HBO-trained Registered Nurse to provide skilled support at no additional cost to Good Samaritan Hospital. The RN helps with patient HBO documentation, direct patient contact, conducting audits, in addition to Good Samaritan Hospital Staff education and training. This RN is a part time employee of the vendor.

Good Samaritan compensates the vendor for the use and operation of the HBO Equipment, furnishings, administration of HBO treatments, and the provision of Administrative Services.

In addition to the Hyperbaric Oxygen Services that the vendor provides to Good Samaritan Hospital, the Bon Secours Charity Health System offers inpatient and outpatient wound care services at its three hospitals: Good Samaritan Hospital in Suffern, Saint Anthony Community Hospital in Warwick, and Bon Secours Community Hospital in Port Jervis.

Good Samaritan Hospital provides comprehensive wound care services with regular wound prevention and treatment rounds throughout the hospital and for outpatients in the Wound Care Center. Inpatient wound care coverage is provided by a full-time Nurse Practitioner with wound, ostomy, and continence certification. The Wound Care Center, co-located with the hyperbaric operations, is staffed by a full-time nurse manager, a full-time wound, ostomy, and continence nurse, a part-time registered nurse, two per-diem registered nurses, a medical assistant, and a medical secretary. The medical director is a general surgeon employed full-time by the Bon Secours Medical Group with the additional responsibility for clinical oversight of the Wound Care Center. The medical staff includes general surgery and podiatry, with additional services as needed or available.

Saint Anthony Community Hospital operates a part-time wound care clinic staffed by registered nurses and a surgeon contracted to provide wound care services and medical direction.

Bon Secours Community Hospital employs one full-time wound, ostomy, and continence nurse to provide inpatient wound care support and a part-time wound care clinic staffed by the nurse and a surgeon who is contracted to provide wound care services and medical direction.

Below is the wound care and HBOT treatment data for Bon Secours Charity System:

Location	Type	# Patients 2015	# Treatments 2015	# Patients 2016	# Treatments 2016	# Patients 2017*	# Treatments 2017*
Good Samaritan	Wound Care	574	3960	586	3504	638	3582
Good Samaritan	HBOT	53	717	56	1157	56	798
Saint Anthony's	Wound Care	66	438	57	239	70	422
Bon Secours Community	Wound Care	145	872	153	1070	172	988

\*Extrapolated for full year

#### HealthAlliance's Wound Care and Hyperbaric Treatment Scopes of Work

HealthAlliance had an inpatient and outpatient wound care program at its Broadway and Mary's Avenue campuses in Kingston, New York between 2005 and October 2016. The program was a multidisciplinary, comprehensive, wound management program for patients that had acute and chronic wounds. Services offered to adolescents, adults, and geriatric patients, included ostomy care, extensive wound assessment, treatments based on advanced medical methodologies, pain management, infection control and patient education.

The program was administered by a Medical Director of Wound Care (an Infectious Diseases physician) who was contracted by HealthAlliance to provide clinical supervision and oversight of wound care services. The outpatient staff included two (2) additional Infectious Diseases physicians as well as two (2) Podiatrists who provided services on assigned days each week. There were also two (2) full-time registered nurses, one of whom served as a Director/Clinical Coordinator, six (6) part-time registered nurses, one (1) part-time ostomy registered nurse, two (2) per diem registered nurses, one (1) per diem licensed practical nurse, and two (2) full-time office assistants. The inpatient wound care program was staffed by a Medical Director as well as one (1) full-time and four (4) part-time registered nurses. The staff was employed by HealthAlliance with the exception of the Medical Director who was contracted from an external company.

The program was located in an area that consisted of two (2) waiting areas, office space for staff, Medical Director, Program Director, inpatient wound care staff, eight (8) exam rooms, documentation room for outpatient staff and physicians, kitchen area, three (3) patient bathrooms, dirty utility room, clean utility area and a temperature monitored room. Outpatient services were provided from 7:00 a.m. to 3:00 p.m. Monday through Friday while inpatient services were provided seven (7) days per week to provide consistent wound care for patients identified as requiring extensive care.

In addition to the wound care program, HealthAlliance offered an outpatient hyperbaric oxygenation therapy (HBOT) program at its Broadway Campus from 2009 to July 2015. The program, which worked in conjunction with the wound care program, was also offered to adolescents, adults, and geriatric patients with acute and chronic wounds. HBOT services were available to outpatients who satisfied the qualification criteria of the Medicare/CMS guidelines for HBOT.

The HBOT program was staffed by one (1) supervising physician, one (1) full-time lead supervising certified HBO tech, two (2) full-time HBO techs, one (1) full-time office assistant / biller, and per-diem staff to avoid shortages.

Below is the outpatient wound care, HBOT, and outpatient ostomy treatment data for HealthAlliance:

Type	#Patient Visits 2015	# Chargeable Procedures 2015	# Patient Visits 2016	# Chargeable Procedures 2016	# Patient Visits 2017*	# Chargeable Procedures 2017*
Wound Care	5,323	8,040	4,986	6,513	4975	6360
HBOT	186	711	—	—	—	—
Ostomy	81	81	99	99	125	125

\*Extrapolated for full year

WMCHHealth's primary business objective is to obtain proposals from wound care and hyperbaric treatment vendors regarding best practices in wound care and hyperbaric treatment. Proposals must include information regarding the deliverables listed below:

a. HBO Treatment Facility

- i. HBO equipment: Chamber brand and quantity
- ii. Space requirements for HBO unit and accompanying Wound Care practice
  - Vendor must provide equipment consistent with current equipment set-up, including, but not limited to, hyperbaric chambers (transcutaneous oxygen monitoring device), IV pumps, gurneys, exam tables, examining room equipment.
  - Vendor may propose additional equipment.
  - Vendor must provide all maintenance of equipment at their expense.
  - Please provide processes if upgraded Equipment becomes available.
  - Please provide purchase options in the event of termination of an agreement.

b. Administrative services

- i. Vendor must assist with the development of policies and clinical protocols. These will become the property of WMCHHealth.
- ii. Vendor must assist with licenses, permits, and certificates.
- iii. Vendor must assist with regulatory surveillance including, but not limited to: JCAHO, DNV and UHMS accreditation.
- iv. Vendor must provide consulting services relative to optimizing the delivery of wound care services and hyperbaric treatment.
- v. Vendor must identify strategies for cost containment of wound supplies.
- vi. Vendor must provide a QA/PI Plan.
- vii. Vendor must actively monitor all QA/PI activities and maintain a dashboard to be submitted monthly.
- viii. Vendor must provide a Marketing Plan.
- ix. Vendor must provide a Training Plan to ensure continuing education requirements mandated by UHMS are able to be carried out.

x. Hours of Operation

Location	Current Status	Hours of Operation
Westchester Medical Center	HBO Only	24/7
Good Samaritan Hospital	HBO & Wound Care	Business Day
Bon Secours Community	Wound Care Only	Business Day
St. Anthony's	Wound Care Only	Business Day
MidHudson Regional Hospital	HBO & Wound Care	Business Day
HealthAlliance Hospital Mary's Avenue	Wound Care Only	Business Day

c. Supplies

- i. Wound Care – Vendor should propose a formulary for wound care products and also be able to provide a comprehensive recommendation for suggested quantities of supplies.
- ii. Vendor is responsible for medical gases and supplies.
- iii. WMCHHealth will provide linen.
- iv. Vendor is responsible for ensuring staff have and don appropriate uniforms.
- v. Vendor must provide their own office supplies and equipment.

d. Staff (excluding physicians) - Cost of staff will be Vendor's responsibility.

- i. Administrative
  - One on-site manager at each site;
  - At least one Safety Director who will remain onsite during business hours;
  - Diabetic Educator;
  - Clerical staff as needed, including staff with expertise in billing and collection;
- ii. Nursing and technical
  - RNs, preferably CHRN(s), as dictated by patient volume;
  - A minimum of one CHRT for each practice equipped with hyperbaric chambers;
- iii. Staff training
- iv. One Community Educator/Outreach Coordinator for the Network

e. Vendor is responsible for Billing and Collection Efforts including outstanding accounts receivable.

f. Vendor is responsible to maintain accurate records for review by WMCHHealth including, but not limited to:

- i. Patient scheduling
- ii. Treatments rendered
- iii. Patient records
- iv. Staff scheduling
- v. Substantiation of all charges to WMC

g. Treatment Outcomes

- i. Home Care by Registered Nurse
- ii. Plan for minimizing readmissions

- h. Propose a transparent financial model which delineates all costs to WMCHHealth.
- i. Propose a transition and implementation plan and schedule.

**Proposals may include any or all of the above services.**

## **5. Administrative Information**

### **5.1 Reservation of Rights**

The Corporation reserves the right to:

- Reject any or all proposals received in response to the RFP;
- Withdraw the RFP at any time, at the agency's sole discretion;
- Make an award under the RFP in whole or in part;
- Pursue any or all of the services described herein from alternate sources;
- Disqualify a proposer whose conduct and/or proposal fails to conform to the requirements of the RFP;
- Seek clarifications and revisions of proposals;
- Require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of a proposer's proposal and/or to determine a proposer's compliance with the RFP requirements;
- Prior to the opening of proposals, amend the RFP specifications to correct errors or oversights, or to supply additional information about the services sought as such information becomes available;
- Prior to the opening of proposals, direct proposers to submit proposal modifications addressing subsequent amendments or addenda to the RFP;
- Change any date set forth in this RFP;
- Waive any informalities or any non-material requirements of the RFP;
- Negotiate with the successful proposer within the scope of the RFP in the best interests of the Corporation;
- Require proposers to submit best and final offers ("BAFOs");
- Award contracts to more than one successful proposer;
- Negotiate with selected proposers prior to contract award;
- Make any payment contingent upon the submission of specific deliverables; and
- Require that all offers be held open for a period of 120 days unless otherwise expressly provided for in writing.

### **5.2 Confidentiality of Proposals**

Confidential, trade secret, or proprietary materials must be clearly marked and identified as such upon submission by the proposer. Proposers must provide specific justification as to why disclosure of particular information in the proposal would cause substantial injury to the competitive position of the proposer.

Properly identified information that has been designated confidential, trade secret, or proprietary by the proposer will not be disclosed except as may be required by the Freedom of Information Law or other applicable state or federal laws. In the event that the Corporation determines that the law requires that confidential information be disclosed, the Corporation will notify the proposer so that it may take whatever steps it deems appropriate.

### **5.3 Non-Discrimination and MWBE Policy**

It is the policy of the Corporation to comply with all federal, state, and local laws, policies, orders, rules and regulations that prohibit unlawful discrimination because of race, creed, color, national origin, sex, sexual orientation, age, disability, or and

marital status and to encourage the meaningful and significant participation at all levels (proposer, Subcontractor, Suppliers and others) for business enterprises owned by persons of color and women – Minority Business Enterprise (MBE) and Women Business Enterprise (WBE).

The proposer is encouraged to use its good faith efforts to encourage, promote, and increase participation of MWBEs in the services sought by this RFP and to efficiently and effectively monitor such participation in accordance with WMCHHealth’s procurement policy.

## **6. Contract Overview**

### **6.1 Contracting Parties**

Three WMCHHealth entities will be the ultimate contracting parties in agreements with the successful proposer(s) resulting from this RFP - Westchester County Health Care Corporation d/b/a Westchester Medical Center (WMC), Bon Secours Charity Health System, Inc., and HealthAlliance of the Hudson Valley (HAHV). The WMC contract will provide for performance of Services for WMCValhalla and MidHudson Regional Hospital. The BSCHS contract will provide for performance of Services for Good Samaritan Hospital, Bon Secours Community Hospital and St. Anthony Community Hospital. The HAHV contract will provide for performance of Services for HealthAlliance – Broadway Campus.

### **6.2 Contract Provisions**

The contract will incorporate provisions of this RFP and portions of the successful proposal to which the Corporation agrees. The contract will be on Corporation’s standard contract form, which will include the Corporation’s Standard Terms and Conditions set forth in **Attachment A** and Corporation’s Travel and Expense Policy for Vendors as set forth in **Attachment B**, and any applicable riders or other information deemed appropriate by the Corporation. The properly executed contract shall supersede all proposals, whether written or oral, and any and all negotiations, conversations, and discussions prior to execution of the contract.

Final contracts executed pursuant to this RFP shall be subject to Corporation’s purchasing policies and procedures and the review and approval of Corporation’s Office of Legal Affairs.

### **6.3 Acceptance of Terms and Conditions**

Vendor must acknowledge that it has read the Corporation’s Standard Terms and Conditions, as set forth in **Attachment A**, and that it understands and agrees to be bound by the same, with noted exceptions. Vendor must provide a separate document of exceptions, if any, taken to the Corporation’s Standard Terms and Conditions. Each exception must reference a specific numbered paragraph of the Standard Terms and Conditions. Vendor shall state a proposed alternative to each exception taken when stating that the term or condition is “unacceptable.” **Any exceptions to Corporation’s Standard Terms and Conditions may disqualify a vendor’s proposal.**

### **6.4 Disposition of Proposals**

All proposals received by the due date become the property of the Corporation and shall not be returned. Any successful proposal may be incorporated into the resulting contract and will become public record. Any proposals received after the due date will be returned to the proposer unopened.



## WMCHHealth Definitions and Standard Terms and Conditions

### ARTICLE I DEFINITIONS

- 1.1. Agreement. "Agreement" shall mean the written agreement between the Corporation and the successful proposer, if any, awarded a contract to develop and implement the Services sought by this RFP.
- 1.2. Corporation. "Corporation" shall mean the corporate entity entering the Agreement with Vendor (*i.e.*, Westchester Medical Center or Bon Secours Charity Health System, Inc.).
- 1.3. Services. "Services" shall mean the Professional First Impression Services as may be offered by Vendor to the Corporation as part of a proposal submitted in response to this RFP.
- 1.4. Vendor Representative. "Vendor Representative" shall mean all employees, Vendors, agents, subcontractors or representatives of Vendor providing Services on behalf of Vendor at any Corporation site.

### ARTICLE II SERVICES AND PAYMENT

- 2.1. Services. All Services shall be performed in a manner consistent with the generally recognized standards of persons regularly engaged in providing such services. Vendor warrants to the Corporation that any Services performed and any materials used by Vendor in connection with the Services shall be free from defects in workmanship and/or materials and agrees that any damage arising from any breach of this warranty shall promptly be remedied by Vendor at its sole expense.
- 2.2. Conduct. All Vendor Representatives shall, at all times while present at the Corporation campus, comply with Corporation's rules and regulations and the lawful directives of Corporation's security personnel and Corporation's administration. Vendor Representatives shall, at all times while present at the Corporation campus, conduct themselves in accordance with Corporation's Policies and Procedures, including the Corporation's Code of Conduct, Sexual Harassment Policy, and Anti-Discrimination Policy. The Vendor shall promptly remove from the Corporation campus any Vendor Representative whose conduct the Corporation reasonably determines to be objectionable.
- 2.3. Ownership of Records. All records compiled by Vendor in providing and completing the Services, including but not limited to written reports, studies, computer protocols, graphs, charts and all other similar recorded data, shall become and remain the property of the Corporation. Vendor may retain copies for its own use, all of which shall be subject to all confidentiality requirements set forth herein.
- 2.4. Payment Terms. Corporation shall pay all properly submitted and undisputed invoices for the Services within ninety (90) days from the date Corporation receives an invoice. All invoices must reference the Contract Number and are to be addressed to Corporation, at the Corporation address provided in each purchase order, to the Attention of the Accounts Payable Department.
- 2.5. Interest and Other Charges. Any references in any Vendor quotation, invoice or agreement to interest charges, late fees, restocking fees or cancellation charges shall be excluded from and superseded by the Agreement.
- 2.6. Taxes. Corporation and its facilities are exempt from local, state, and federal taxes (including local and state sales or use taxes). Upon request, Corporation will furnish evidence of such tax-exemption. Corporation shall not be charged or subject to, and shall not pay, any tax, tariff, duty, cost or expense imposed by any taxing authority outside the United States of America and any such tax, tariff, duty, cost, or expense shall be the sole responsibility of the Vendor.

### ARTICLE III TERM AND TERMINATION

- 3.1. Term. The Agreement shall commence on the Effective Date of the Agreement and shall continue for a period of (1) year and shall automatically renew for four (4) one (1) year periods, unless earlier terminated in accordance

with this Article III.

- 3.2. Termination for Cause. Either Vendor or Corporation shall have the right to immediately terminate the Agreement in its entirety in the event of a material breach of the terms of the Agreement by the other party which is not cured within thirty (30) calendar days following receipt of written notice specifying the breach.
- 3.3. Termination Without Cause. Either Vendor or Corporation shall have the right to terminate the Agreement in its entirety without cause by providing the other Party at least sixty (60) days prior written notice.
- 3.4. Insolvency. If either Party shall be declared insolvent or shall make an assignment for the benefit of creditors, or if a receiver or trustee shall be appointed of, or for, either Party's property or business, the Agreement may be terminated, at the other Party's option, without liability hereunder.
- 3.5. Remedies. Termination by either Party pursuant to the terms of this Article III, whether for default or otherwise, shall be without prejudice to any claims for damages or other rights against the other Party that arose prior to termination.
- 3.6. Disruption of Patient Care. Notwithstanding the foregoing or any other Agreement between the Parties, if Vendor terminates the Agreement or any provision hereof and such termination, based on the reasonable, good faith determination of Corporation, would likely result in the disruption of patient care, upon written notice from Corporation as to such likely disruption, Vendor shall continue to provide the Services purchased hereunder and receive compensation, as specified in the Agreement or applicable purchase order and in accordance with Article II hereof, until Corporation has secured an alternate supplier of comparable or substantially similar goods, but in no event shall such continued provision of the Services exceed a period of one hundred and twenty (120) days from Vendor's receipt of Corporation's notice.

#### ARTICLE IV GENERAL PROVISIONS

- 4.1. Confidentiality. For purposes of this Section 4.1 "Confidential Information" shall mean any and all proprietary information, customer lists, patient information, customer purchasing requirements, prices, trade secrets, know-how, processes, documentation and all other information without limitation which is not generally known to, or readily ascertainable by proper means, by the public or which might reasonably be considered confidential, secret, sensitive, proprietary or private to either the Vendor or Corporation.
  - 4.1.1. In performing their respective obligations under the Agreement, the Vendor and Corporation may come into contact with, be given access to, and, in some instances, contribute to each other's Confidential Information. In consideration of permitting the Vendor and Corporation to have access to each other's Confidential Information, during the term of the Agreement, the Vendor and Corporation agree that they will not disclose to any third party any Confidential Information of the other Party, except as provided in Section 4.1.3, without the other Party's prior written consent. The Vendor and Corporation shall only make the Confidential Information of the other Party available to its employees, auditors, attorneys or other professionals or Vendors hired by such Party in the ordinary course, to the extent that their duties, requirements, or contract for services require such disclosure, and agree to take appropriate action by instruction or agreement with such individuals permitted access to the Confidential Information to satisfy the obligations under this Section.
  - 4.1.2. The provisions of this Section will not apply to information: (i) developed by the receiving Party without use of, or access to, the disclosing Party's Confidential Information; (ii) that is or becomes publicly known without a breach of the Agreement; (iii) disclosed to the receiving Party by a third party not required to maintain such information confidential; or (iv) that is already known to the receiving Party at the time of disclosure. The provisions of this Section 4.1.2 shall not apply to "Protected Health Information" as that term is defined in the Health Insurance Portability and Accountability Act of 1996 and its related regulations, 45 C.F.R. Parts 160 and 164.
  - 4.1.3. If any law, governmental authority or legal process requires the disclosure of Confidential Information, the subject Party may disclose such information, provided, that, the other Party is notified of the disclosure.

- 4.2. Disclosure of Protected Health Information (PHI). If the transaction involves any disclosure of PHI to the Vendor, and the Vendor is determined to be a Business Associate (as that term is defined in the Health Insurance Portability and Accountability Act of 1996 and its related regulations, 45 C.F.R. Part 160 and 164), the Vendor will execute a Corporation Business Associate Agreement.
- 4.3. Business in Confidence. Neither Party shall, without first obtaining the written consent of the other Party, advertise or publish the fact that Vendor has contracted to provide, or Corporation has contracted to purchase, the Services that are the subject of the Agreement.
- 4.4. Publicity and Trademarks. Each Party will not, and will cause its affiliates not to, use the name or any trademark or service mark of the other Party or any of its affiliates without the prior written consent of the other Party.
- 4.5. Financing Statements. The Vendor acknowledges and agrees that the filing of any financing statement under the Uniform Commercial Code in connection with any transaction related to the Agreement is expressly prohibited unless such filing is agreed to in writing by the Chief Financial Officer of Corporation or such filing is for notification purposes with respect to custodial or other arrangements not intended as a secured transaction in which case such financing statements must expressly state: "This financing statement is filed for notice purposes only and the filing thereof shall not be deemed to create, or to constitute evidence of, a security interest under the Uniform Commercial Code."
- 4.6. Safe Harbor Discount. Each Party agrees to comply at all times with the regulations issued by the United States Department of Health and Human Services published at 42 C.F.R. Part 1001, and which relate to the Vendor's obligation to report and disclose discounts, rebates, and other reductions to Services purchased under the Agreement. Where a discount or other reduction in price of the Services is applicable, the Vendor agrees to comply with the requirements of 42 U.S.C. §1320a-7b(b)(3)(a) and the "safe harbor" regulations regarding discounts or other reductions in price set forth at 42 C.F.R. §1001.952(h). In this regard, the Vendor will satisfy any and all requirements imposed on sellers by the safe harbor and Corporation will satisfy any and all requirements imposed on buyers by the safe harbor.
- 4.7. Government Health Program Participation. Each Party represents that it has not been excluded from participating in any "federal health care program," as defined in 42 U.S.C. § 1320a-7b(f), or in any other federal or state government payment program and that it is eligible to participate in the foregoing programs. If either Party is excluded from participating in, or becomes otherwise ineligible to participate in, any such program during the term of the Agreement, such Party will notify the other Party of that event within thirty (30) days. Upon occurrence of that event, whether or not such notice is given, either Party may terminate the Agreement effective upon written notice to the other Party.
- 4.8. Debarment. The Vendor represents that (a) it has not been convicted of a criminal offense related to health care; (b) it is not currently listed by a federal agency as debarred or otherwise ineligible for participation in federally funded programs; the Vendor has conducted a search of the Excluded Parties List System on the System for Award Management website (<https://www.sam.gov/portal/SAM/#1>) and has attached to this Agreement a print out of a "no search results", indicating that Vendor has not been identified on the Excluded Parties List System (EPLS); and (c) it is not currently listed by the State of New York, any political subdivision of the State of New York or any public benefit corporation or public authority as debarred, excluded or otherwise ineligible to contract with such public entity. The Vendor shall promptly notify Corporation, in writing, of any change in this representation during the term of the Agreement. Such change in circumstances shall constitute cause for which Corporation may terminate the Agreement pursuant to Article III. For purposes of this Section 4.8, the Vendor is defined as the entity entering into the Agreement, and/or its principals, employees, directors and officers and owners, provided, however, that, if the Vendor is publicly traded, the term "Vendor", for the purposes of this Section, shall not include persons owning publicly traded shares of Vendor).
- 4.9. Personal Inducements. The Vendor represents and warrants that no cash, equity interest, merchandise, equipment, services or other forms of remuneration have been offered, shall be offered or will be paid or distributed by or on behalf of the Vendor to Corporation or the New York Medical College or any physician or physician practice privileged or affiliated with either of them and/or the employees, officers, or directors of any of the foregoing and their immediate family members as an inducement to purchase or to influence the purchase

of Services by Corporation from the Vendor. In addition to any other remedy to which Corporation may be entitled and any other sanction to which a Vendor may be liable for a breach of the foregoing representation and warranty, Corporation, at its option, may declare any agreement between the Vendor and Corporation null and void.

- 4.10. Compliance with Laws and Regulations. In the performance of their duties and obligations hereunder, each Party warrants that it shall comply with all applicable federal and state laws and regulations, including without limitation the Federal Food, Drug and Cosmetic Act, the Prescription Drug Marketing Act, equal-opportunity laws, and fraud and abuse laws. The Vendor further warrants that all Services purchased pursuant to the Agreement will conform and comply with all applicable provisions of governing laws, ordinances, rules and regulations. The Vendor shall obtain and maintain in full force and effect during the term of the Agreement all licenses, permits, certificates and accreditations as may be required by law or regulation. The Vendor agrees that in the event it receives any written notice of non-compliance with any statute or regulation from any federal or state agency that may materially affect the Vendor's performance hereunder, the Vendor will promptly notify Corporation in writing of the receipt of such notice and the nature of such notice.
- 4.11. Labor Laws. For any Services subject to the requirements of Articles 9 of the New York State Labor Law, building service employees in the employ of Vendor, subcontractors, or other persons doing or contracting to do the whole or a part of the Services hereunder, shall be paid the prevailing wage rates and mandatory supplements (including, but not limited to, health, welfare, non-occupational disability, retirement vacation benefits, holiday pay, life insurance and apprenticeship training) required by such law.
- 4.12. Access to Books and Records. To the extent required by law, Corporation and Vendor agree to comply with the Omnibus Reconciliation Act of 1980 (P.L. 96-499) and its implementing regulations (42 CFR, Part 420). Vendor further specifically agrees that until the expiration of four (4) years after furnishing Services pursuant to the Agreement, the Vendor shall make available, upon written request of the Secretary of the Department of Health and Human Services, or upon request of the Comptroller General, or any of their duly authorized representatives, the Agreement and the books, documents and records of the Vendor that are necessary to verify the nature and extent of the costs charged to Corporation hereunder. The Vendor further agrees that if Vendor carries out any of the duties of the Agreement through a subcontract with a value or cost of ten thousand dollars (\$10,000) or more over a twelve (12) month period, with a related organization, such subcontract shall contain a clause to the effect that until the expiration of four (4) years after the furnishing of such services pursuant to such subcontract, the related organization shall make available, upon written request to the Secretary, or upon request to the Comptroller General, or any of their duly authorized representatives the subcontract, and books and documents and records of such organization that are necessary to verify the nature and extent of such costs.
- 4.13. Dispute Resolution. Upon the agreement of both Parties, any dispute as to the performance of a Party's obligations under the Agreement or any related matter may be referred to non-binding mediation by a neutral third party, the rules and procedures of which shall be mutually agreed to by the Parties. Nothing in this paragraph shall be construed to prevent or delay either Party from exercising, at any time, any and all legal rights available to it in a court of competent jurisdiction. No offer, finding, action, inaction or recommendation made or taken in or as a result of mediation shall be considered for any purpose as an admission of a Party, nor shall it be offered or entered into evidence in any legal proceeding.
- 4.14. Governing Law and Venue. The Agreement shall be construed, and its performance enforced, under New York law without regard to conflicts of laws principles. To the fullest extent permitted by law, each party waives trial by jury in any action, proceeding or counterclaim brought by or on behalf of either Party with respect to any matter relating to the Agreement.
- 4.15. Attorney's Fees. If any action or proceeding is commenced by either Party for the enforcement of or in connection with the Agreement, each Party shall be responsible for its own attorneys' fees, costs, and disbursements incurred in connection with such action.
- 4.16. Limitation of Liability. The liability of the Parties to each other for damages in connection with the Agreement, regardless of the form of action, shall not exceed the actual damages incurred by the Party seeking redress. Neither Party shall be liable to the other for any special, consequential, punitive, or exemplary damages arising

from the Agreement, including but not limited to damages for loss of future business and/or lost profits. This provision shall not apply to claims raised by third parties against the Vendor or Corporation, or, to claims in which either Party joins the other as a third party defendant. Notwithstanding the foregoing limitations or anything in this Agreement to the contrary, this section shall not apply to (a) a party's obligations of indemnification as further described in this Agreement; (b) a party's breach of its obligations of confidentiality as further described in this Agreement; (c) damages caused by a party's willful misconduct; or (d) claims raised by third parties against Vendor or the Corporation, or, to claims in which either Party joins the other as a third party defendant.

- 4.17. Insurance. The Vendor will maintain general public liability insurance against any insurable claims as set forth in Schedule B-1 attached hereto.
- 4.18. Indemnity.
- 4.18.1. Indemnification by Vendor. Vendor agrees that, except for the amount, if any, of damage contributed to, caused by or resulting from the negligence or willful misconduct of the Corporation, Vendor shall defend, indemnify and hold harmless the Corporation, its officers, employees and agents from and against any and all liability, damages, claims, demands, costs, judgments, fees, reasonable attorneys' fees or loss arising directly or indirectly out of the negligence or willful misconduct hereunder by Vendor or third parties under the direction or control of Vendor.
- 4.1.1. Indemnification by Corporation. To the extent permitted by law, the Corporation agrees that, except for the amount, if any, of damage contributed to, caused by or resulting from the negligence or willful misconduct of Vendor, the Corporation shall defend, indemnify and hold harmless the Corporation, its officers, employees and agents from and against any and all liability, damages, claims, demands, costs, judgments, fees, reasonable attorneys' fees or loss arising directly or indirectly out of the negligence or willful misconduct hereunder by the Corporation or third parties under the direction or control of the Corporation.
- 4.1.2. Consent to Settlement. The indemnifying Party may not settle any claim without the consent of the other Party unless there is no finding or admission that the other Party has violated any law or the rights of any person or entity and the sole relief provided is monetary damages that the indemnifying Party pays in full or injunctive relief enforceable only against the indemnifying Party.
- 4.2. Representative Access. Corporation reserves the right to require and Vendor shall upon the request of Corporation ensure that any Vendor Representative that will have access to clinical areas of Corporation's facility shall undergo a pre-placement assessment of health status to make certain that they are free from health impairment which is of potential risk to patients and personnel as indicated by a recorded medical history, physical examination, immunizations and laboratory testing.
- 4.3. Background Check. Vendor further agrees that all Vendor Representatives assigned to Corporation hereunder will be subject to a background check substantially similar to the inquiries made by the Corporation with respect to its own employees and that the Corporation has the right to deny any Vendor Representative access to its facilities based on the results of such inquiry.
- 4.4. Conflicts of Interest. The Vendor represents, to the best of its knowledge, that no employee, officer, or director of, and no physician or physician practice affiliated with, Corporation has a financial interest in the Vendor. The Vendor further agrees that if it discovers or otherwise becomes aware that an employee, officer, or director of, or a physician or physician practice affiliated with, Corporation has a financial interest in the Vendor, Vendor shall promptly disclose that financial interest to Corporation in writing. To the extent that a financial interest is disclosed by Vendor in accordance with this Section, the Parties agree to make good faith efforts to resolve any conflict of interest, provided however, in the event that such conflict of interest cannot be resolved, Corporation, at its option, may declare any agreement between the Vendor and Corporation null and void.
- 4.4.1. Financial Interest. For purposes of this Section, the term "financial interest" shall include the following transactions or relationships: (a) payment of fees including consulting fees, royalty fees, honoraria, or other emoluments or "in kind" compensation; (b) any gift of more than nominal value; (c) service as an officer or director of Vendor whether or not remuneration is received for such service; or (d) an ownership interest in Vendor, except that a shareholder owning less than a majority of shares of a publicly traded entity shall not

be deemed to have a financial interest for the purposes of this Section.

- 4.5. Survival. All provisions regarding confidentiality, indemnification, warranty, liability and limits on liability shall survive termination of the Agreement.
- 4.6. Force Majeure. Neither Party shall be deemed to be in default of or to have breached any provision of the Agreement as a result of any delay or failure in performance due to reasons beyond such Party's reasonable control. If such a delay occurs, the affected Party may extend the time for performance by a period of time equal to the delay. Notwithstanding the foregoing, if a force majeure event is claimed by either Party and such event continues for more than fifteen (15) business days, either Party shall have the right and option to terminate the Agreement
- 4.7. Entire Agreement. The Agreement shall constitute the entire agreement between the Parties concerning the subject matter of the Agreement and will supersede all prior negotiations and agreements between the Parties concerning the subject matter of the Agreement. The terms of any purchase order, invoice, or similar documents used to implement the Agreement shall be subject to and shall not modify the Agreement.
- 4.8. Amendment. The Agreement may only be amended by written agreement of the Parties.
- 4.9. Assignment. Neither Party may assign any of its rights or obligations under the Agreement, either voluntarily or involuntarily (whether by merger, consolidation, dissolution, operation of law, or otherwise), without the prior written consent of the other Party. Any purported assignment in violation of this section will be void. Any request for consent to an assignment to an affiliate of a Party (i.e. an entity that controls, is controlled by, or is under common control with a Party) shall not be unreasonably withheld, conditioned, or delayed by the consenting Party.
- 4.10. Relationship of the Parties. For purposes of the Agreement, each Party will be an independent contractor. The Agreement will not create a partnership, association, or other business entity. Neither Party has any authority to act for or to bind the other.
- 4.11. Waiver. No provision of the Agreement may be waived except by a writing signed by the Party against whom the waiver is sought to be enforced. No failure to enforce any provision of the Agreement constitutes a waiver of future enforcement of that provision or of any other provision of the Agreement.
- 4.12. Other Contractual Obligations. Each Party represents that it is not prohibited from entering into, or performing its obligations under, the Agreement by the terms of any other agreement.
- 4.13. Counterparts. The Agreement may be executed in two or more counterparts, each of which shall be an original, but all of which together shall constitute one and the same instrument. The Parties agree to accept and be bound by facsimile or PDF transmitted copies of the Amendment and its counterparts including facsimile or PDF signatures of the Parties.



## SCHEDULE B-1

INSURANCE REQUIREMENTS

1. Prior to providing the Services hereunder, the Vendor shall obtain at its own cost and expense the insurance required herein from a licensed insurance company, carrying a Best's financial rating of A or better, and shall provide evidence of such insurance to the Corporation, which evidence shall be subject to Corporation's approval. The policies or certificates thereof shall provide that Corporation shall receive thirty (30) days' written notice prior to cancellation of or material change in the policy, which notice shall name Vendor, identify this Agreement, and be sent via registered mail, return receipt requested. Failure of the Vendor to obtain and maintain any insurance required hereunder shall not relieve the Vendor from any of its obligations hereunder, including but not limited to indemnification, or from any Vendor liability hereunder. All property losses shall be made payable to, and adjusted with, the Corporation. If claims for which Vendor may be liable are filed against either Party, and if such claims exceed the coverage amounts required herein, Corporation may withhold such excess amount from payment due to Vendor until the Vendor furnishes additional security covering such claims in a form satisfactory to the Corporation.
2. The Vendor shall provide proof of the following coverage:
  - (a) Workers' Compensation. Vendor shall provide to Corporation a certificate form C-105.2 or State Fund Insurance Company form U-26.3 as proof of compliance with the New York State Workers' Compensation Law, and State Workers' Compensation Board form DB-120.1 as proof of compliance with the New York State Disability Benefits Law, provided, however, that if Vendor is self-insured for Worker's Compensation and/or Disability coverage, a New York State Workers' Compensation Board certificate evidencing such fact. Location of operation shall be "All locations in Westchester County, New York."
  - (b) Employer's liability insurance with a minimum limit of \$100,000.
  - (c) General liability insurance with a minimum limit of liability per occurrence of \$1,000,000 for bodily injury and \$100,000 for property damage or a combined single limit of \$1,000,000 (c.s.1), naming the Westchester Medical Center as an additional insured. This insurance shall indicate the following coverage on the certificate of insurance:
    - (i) Premises - Operations.
    - (ii) Broad Form Contractual.
    - (iii) Independent Contractor and Sub-Contractor.
    - (iv) Products and Completed Operations.
  - (d) Professional liability insurance ("acts and omissions") on an occurrence basis covering the Vendor and its employees and agents, with minimum limits of \$1,300,000 per occurrence, \$3,900,000 in the aggregate.
  - (e) Vehicle liability insurance with a minimum limit of liability per occurrence of \$1,000,000 for bodily injury and a minimum limit of \$100,000 per occurrence for property damage or a combined single limit of \$1,000,000. This insurance shall include the following coverage for bodily injury and property damage arising out of the use of owned, hired and non-owned vehicles.
3. All policies and certificates of insurance required herein shall provide that:
  - (a) The insurer, or Vendor if it is self-insured, shall have no right to recovery or subrogation against the Corporation (including its employees and agents), it being the intention of the Parties that the insurance policies shall protect both Parties and be primary coverage for any and all losses covered by the insurance.
  - (b) The insurer, or Vendor if it is self-insured, shall have no recourse against the Corporation (including its employees or agents) for payment of any premiums or for assessments under the policy.
  - (c) Vendor assumes responsibility, and is solely at risk for, any and all deductibles.
  - (d) The clause "other insurance provisions" shall not apply to the Corporation.

## Travel and Expense Policy for Vendors

### **POLICY**

It is the policy of Westchester Medical Center (WMC) to reimburse certain vendors for out-of-pocket expenses related to:

- a. services provided to the Medical Center
- b. expenses while on official Medical Center business

The obligation of WMC to reimburse such expenses shall be considered by WMC only if:

- a. an executed contract exists between the vendor submitting such expenses and WMC, and such contract references said expenses.
- b. submitted reimbursement claims comply with this policy.

### **PURPOSE**

To provide a mechanism for vendors who do business with WMC to be appropriately reimbursed for travel and expenses as it relates to WMC.

### **SCOPE**

This policy applies to all vendors and contractors of Westchester Medical Center.

### **DEFINITIONS**

None

### **POLICY AUTHOR**

Senior Vice President of Finance  
Senior Vice President of Compliance

### **RELATED POLICIES**

None

### **PROCEDURE**

- For air travel, reimbursement will be at the fares nonrefundable coach fare.
- The use of personal vehicles for travels less than ninety (90) miles from the Medical Center shall not be reimbursed.
- Lodging costs shall be moderate in nature. (Use Corporate discounts when available)
- The Medical Center shall reimburse for only one (1) rented vehicle, including fuel and toll costs, with the exceptions as noted below. Luxury vehicles are not permitted.
- If four or more individuals from the same concern are providing services, the Medical Center shall reimburse one mid-size vehicle for each group of four (4).
- The Medical Center requires valid receipts for all submitted expenses.
- All meals and incidentals will be reimbursed at a flat rate of \$60.00 per day. No receipts are required.

The Medical Center shall not provide payment for the following;

- Gratuities in excess of twenty per cent (20%).
- Alcohol charges.
- Personal expenses including laundry, dry cleaning, phone expenses, "mini bar" costs, etc.
- Phone expenses, routine office expenses, including, but not limited to, photocopying and document preparation expenses, computer costs or upgrades, postage, fax or courier costs.



- Submitted expenses where the business purpose and the personnel attending are not clearly indicated.
- Expenses related to non-Medical Center services, including those costs incurred by spouses or traveling companions.
- Any expense submitted without a valid receipt.

In the event of an emergency or the individual cannot reasonably obtain preapproval for travel and related costs, it is expected that all such expenses shall comply with this policy.

The Medical Center reserves the right to reject any submitted expense that it reasonably determines does not comply with this policy.

**Claims for Reimbursement of Amounts Paid to Third Parties**

If a reimbursement sought is for charges paid to a third party, such claim shall be accompanied by a receipt or other proper evidence sufficient to establish that such amounts have actually been paid and such other evidence to establish the reasonableness and basis for such charges and that such charges comply with this policy. In all cases where such third party payments are subject to any rebate, discount or refund the vendor shall immediately issue a credit advice to WCHCC against any amounts owed by WCHCC to the vendor for its proportionate share of such rebate, discount or refund or if no amounts are then due and owing, then, in that event, the vendor shall immediately pay over to WCHCC the amount of any such rebate, discount or refund. Such rebates, refunds and discounts shall be due to WCHCC when earned by the vendor. This provision shall not be construed to include frequent flyer miles or other benefits to the extent they are credited for the benefit of individual employees assigned to the engagement by the vendor.

**Right to Audit**

All agreements which provide for vendors of goods and services and contractors to make a separately stated claim for reimbursement of reasonable out of pocket expenses, expenses incurred in the production of identifiable deliverables or payments to third parties shall also provide that WCHCC shall have the right, at its own cost and expense, to audit the books and records of such entities which are reasonably pertinent to the amounts claimed by such entity, at any time during the term of the Agreement or for a period of up to twelve (12) months following the expiration or other termination of the agreement.

**EFFECTIVENESS**

This policy shall be effective immediately and shall remain in effect until rescinded or modified.

\_\_\_\_\_  
Senior Vice-President Finance

\_\_\_\_\_  
SEVP, Chief Operating Officer/Chief Financial Officer

\_\_\_\_\_  
President and Chief Executive Officer

## Vendor Debarment/Exclusion Questionnaire

1. Are you or your company or any of its employees currently ineligible to participate in Federal health care programs or Federal procurement or non-procurement programs because of being excluded, debarred, suspended or otherwise declared ineligible to participate?

Yes \_\_\_\_\*      No \_\_\_\_

\* **If you answered Yes**, please provide a complete explanation on an attached sheet of paper.

2. Have you or your company or any of its employees been convicted of any of the following offenses: program-related crimes, crime relating to patient abuse, felony conviction relating to health care fraud, or felony conviction relating to controlled substances, but have not yet been excluded, debarred, suspended or otherwise declared ineligible to participate in Federal health care programs or Federal procurement or non-procurement programs?

Yes \_\_\_\_\*      No \_\_\_\_

\* **If you answered Yes**, please provide a complete explanation on an attached sheet of paper.

3. If you furnish products/goods/services from other vendors/contractors, do you verify with them at the time of contracting that neither the company nor any of its employees is ineligible to participate in Federal health care programs or Federal procurement or non-procurement programs because of being excluded, debarred, suspended or otherwise declared ineligible to participate?

Yes \_\_\_\_      No \_\_\_\_\*

\* **If you answered No**, and you are awarded this contract, you will be required to undertake this screening for any vendors/contractors that will be providing goods or services pursuant to this contract prior to the effective date of the agreement. Such screening is to be performed utilizing the OIG's List of Excluded Individuals/Entities and the GSA's Excluded Parties Listing System.

4. If you furnish products/goods/services from other vendors/contractors, do you verify with them that neither the company nor any of its employees has been convicted of any of the following offenses: program-related crimes, crimes relating to patient abuse, felony conviction relating to health care fraud, or felony conviction relating to controlled substances, but have not yet been excluded, debarred, suspended or otherwise declared ineligible to participate in Federal health care programs or Federal procurement or non-procurement programs?

Yes \_\_\_\_      No \_\_\_\_\*

\* **If you answered No**, and you are awarded this contract, you will be required to undertake this screening for any vendors/contractors that will be providing goods or services pursuant to this contract prior to the effective date of the agreement. Such screening is to be performed utilizing the OIG's List of excluded Individuals/Entities and the GSA's Excluded Parties Listing System.

## Disclosure of Prior Non-Responsibility Determinations

NEW YORK STATE FINANCE LAW § 139-j AND § 139-k

As a public benefit corporation, Westchester Medical Center, as operator of Westchester Medical Center, is obligated to obtain specific information regarding prior non-responsibility determinations. In accordance with New York State Finance Law § 139-k, a proposer must be asked to disclose whether it has been subject to a finding of non-responsibility within the previous four (4) years by a Government Entity<sup>1</sup> due to: (a) a violation of New York State Finance Law § 139-j; or (b) the intentional provision of false or incomplete information to a Governmental Entity. This form is to be completed and submitted by the individual or entity seeking to enter into a contract pursuant to this Request for Proposals.

Name of Proposer: \_\_\_\_\_

Proposer Address: \_\_\_\_\_

\_\_\_\_\_

Name and Title of Person Submitting this Form: \_\_\_\_\_

Date: \_\_\_\_\_

1. Has any Government Entity made a finding of non-responsibility regarding the individual or entity seeking to enter into the contract awarded in connection with this procurement in the previous four (4) years?

Yes\_\_

No\_\_

If yes, please answer the following questions:

2. Was the basis for the finding of non-responsibility due to a violation of State Finance Law § 139-j?

Yes\_\_

No\_\_

3. Was the basis for the finding of non-responsibility due to the intentional provision of false or incomplete information to a Governmental Entity?

Yes\_\_

No\_\_

4. If you answered yes to any of the above questions, please provide details regarding the finding of non-responsibility below:

\_\_\_\_\_

<sup>1</sup> "Governmental entity" means: (1) any department, board, bureau, commission, division, office, council, committee or officer of the State of New York, whether permanent or temporary; (2) each house of the state legislature; (3) the unified court system; (4) any public authority, public benefit corporation or commission created by or existing pursuant to the public authorities law; (5) a public authority or public benefit corporation, at least one of whose members is appointed by the governor or who serves as a member by virtue of holding a civil office of the state; (6) municipal agency, as that term is defined in paragraph (ii) of subdivision (s) of section one-c of the New York State Legislative Law; or (7) a subsidiary or affiliate of such a public authority.

Governmental Entity: \_\_\_\_\_

Date of Finding of Non-Responsibility: \_\_\_\_\_

Basis of Finding of Non-Responsibility:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Add additional pages as necessary)

Signature: \_\_\_\_\_

**State Finance Law Affirmation**  
**NEW YORK STATE FINANCE LAW § 139-j AND § 139-k**

**The proposer hereby affirms that:**

1. The proposer understands and agrees to comply with the procedures of Corporation, relating to restricted communications during the procurement process as required by New York State Finance Law §§ 139-j(3) and 139(j)(6)(b); and
2. All information provided to Corporation by proposer in response to this RFP, including but not limited to information concerning compliance with New York State Finance Law § 139–j and § 139–k, is complete, true, and accurate.

By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Proposer Name: \_\_\_\_\_

Proposer Address: \_\_\_\_\_

\_\_\_\_\_

## M/WBE and EEO Compliance Documentation Forms

Name of Proposer: \_\_\_\_\_

RFP #: \_\_\_\_\_

### A. MINORITY/WOMEN'S BUSINESS QUESTIONS

As part of the Corporation's program to encourage the participation of minority/women's business, we request that you answer the questions listed below. If you do not respond, we will assume that you do not wish to be considered as a minority/women's business.

A minority business enterprise is defined as a business of which 51% or more is owned by minorities or, in the case of a publicly owned business, 51% or more of the voting power in shares of the corporation is owned by minorities. Minorities are defined as Blacks, Hispanics, Asians, American Indians, Eskimos and Aleuts.

A women owned business enterprise is defined as a business in which women own at least 51% of the firm, or in the case of a publicly owned business, at least 51% of the stock is owned by citizens or permanent resident aliens who are women.

#### QUESTIONS:

1. Are you a minority owned business: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is your minority group(s)?

Answer: \_\_\_\_\_

2. Are you a women owned business: Yes \_\_\_\_\_ No \_\_\_\_\_

3. If you answered yes to numbers 1 or 2, what percentage of ownership or voting authority of your business is held by members of a minority group or women?

Answer: \_\_\_\_\_

4. Please identify by name, the minority or women owners of your business and ownership percentage of each.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Diversity Practices Questionnaire

I, \_\_\_\_\_, as \_\_\_\_\_ (title) of \_\_\_\_\_ firm or company (hereafter referred to as the company), swear and/or affirm under penalty of perjury that the answers submitted to the following questions are complete and accurate to the best of my knowledge:

1. Does your company have a Chief Diversity Officer or other individual who is tasked with supplier diversity initiatives? Yes or No

If Yes, provide the name, title, description of duties, and evidence of initiatives performed by this individual or individuals.

2. What percentage of your company’s gross revenues (from your prior fiscal year) was paid to New York State certified minority and/or women-owned business enterprises as subcontractors, suppliers, joint-venturers, partners or other similar arrangement for the provision of goods or services to your company’s clients or customers?

3. What percentage of your company’s overhead (i.e. those expenditures that are not directly related to the provision of goods or services to your company’s clients or customers) or non-contract-related expenses (from your prior fiscal year) was paid to New York State certified minority- and women-owned business enterprises as suppliers/contractors?<sup>2</sup>

4. Does your company provide technical training<sup>3</sup> to minority- and women-owned business enterprises? Yes or No

If Yes, provide a description of such training which should include, but not be limited to, the date the program was initiated, the names and the number of minority- and women-owned business enterprises participating in such training, the number of years such training has been offered and the number of hours per year for which such training occurs.

5. Is your company participating in a government approved minority- and women-owned business enterprise mentor-protégé program?

If Yes, identify the governmental mentoring program in which your company participates and provide evidence demonstrating the extent of your company’s commitment to the governmental mentoring program.

6. Does your company include specific quantitative goals for the utilization of minority- and women-owned business enterprises in its non-government procurements? Yes or No

If Yes, provide a description of such non-government procurements (including time period, goal, scope and dollar amount) and indicate the percentage of the goals that were attained.

7. Does your company have a formal minority- and women-owned business enterprise supplier diversity program? Yes or No

If Yes, provide documentation of program activities and a copy of policy or program materials.

8. Does your company plan to enter into partnering or subcontracting agreements with New York State certified minority- and women-owned business enterprises if selected as the successful respondent? Yes or No If Yes, complete an Utilization Plan (Form Available Upon Request)

Signature of Owner/Official \_\_\_\_\_

Printed Name of Signatory \_\_\_\_\_

Title \_\_\_\_\_

<sup>2</sup> Do not include onsite project overhead.

<sup>3</sup> Technical training is the process of teaching employees how to more accurately and thoroughly perform the technical components of their jobs. Training can include technology applications, products, sales and service tactics, and more. Technical skills are job-specific as opposed to soft skills, which are transferable.

Name of Business

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Address

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City, State, Zip

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