

REQUEST FOR PROPOSALS (RFP)
FOR
Enterprise-wide Time Collection Hardware
ON BEHALF OF THE
Department of Finance and EITS
OF
NYC HEALTH + HOSPITALS

Any questions regarding this RFP should be emailed to:

Name: Hilary Miller
Address: New York City Health + Hospital
Enterprise Information Technology Services
55 Water Street 24th Floor
New York, NY 10038
Telephone: (646) 694-5543
E-mail: hilary.miller@nychhc.org

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SECTION I – REQUEST FOR PROPOSAL (RFP) TIMETABLE

- **Release Date of the RFP:** September 26, 2017
- **Proposer's Questions Due by:** 3PM on October 6, 2017 and must be submitted in writing to Hilary Miller via email hilary.miller@nychhc.org
- **Proposal due Date and Time:** 3PM on October 18, 2017

Sealed proposals are to be delivered to:

From:

Proposer name/address

To:

Name: Hilary Miller

Address: New York City Health + Hospital
Enterprise Information Technology Services

55 Water Street 24th Floor

New York, NY 10038

Telephone: (646) 694-5543

E-mail: hilary.miller@nychhc.org

Doc Control #: DCN-2284

RFP Title: Request for Proposals (RFP)
for Enterprise-wide Time Collection Devices
for the Finance and EITS Departments
of NYC Health + Hospitals

- **Projected Contractor Selection Date:** November 8, 2017
- **Projected Contract Start Date:** January 1, 2018

Your full Proposal must be received no later than **October 18, 2017 - 3pm EST**.

MINIMUM QUALIFICATION REQUIREMENT (PASS/FAIL)

Proposers must provide proof of meeting the minimum qualification requirements as listed below:

1. Must be an official PeopleSoft Partner

Proposers that do not meet the minimum qualification requirements will not be further evaluated.

SECTION II – NYC HEALTH + HOSPITALS BACKGROUND

NYC Health + Hospitals is an integrated health care system of hospitals, neighborhood health centers, long-term care, nursing homes and home care -- the public safety net health care system of New York City. NYC Health + Hospitals is committed to the health and well-being of all New Yorkers and we offer a wide range of high quality and affordable health care services to keep our patients healthy and to address the needs of New York City's diverse populations.

NYC Health + Hospitals Mission and Values

NYC Health + Hospitals is committed to excellence in health care. Our providers work together to provide comprehensive, personalized care to all New Yorkers. Our mission is:

- **To extend equally** to all New Yorkers, regardless of their ability to pay, comprehensive health services of the highest quality in an atmosphere of humane care, dignity and respect.
- **To promote and protect**, as both innovator and advocate, the health, welfare and safety of the people of the City of New York.
- **To join with other health workers and with communities** in a partnership which will enable each of our institutions to promote and protect health in its fullest sense – the total physical, mental and social well-being of the people.

Our Guiding Principles

NYC Health + Hospitals' Guiding Principles reinforce six essential features of our daily work: a patient-centered approach, safety, excellence, cost savings and resource management, teamwork, and employee development. Our Guiding Principles provide a foundation to achieve the “Triple Aim” of better health, better care, and better value:

- **Keep Patients First:** Patients are at the center of everything we do. We treat our patients with respect and empathy. We achieve high levels of patient satisfaction by meeting or exceeding expectations. In caring for all, we serve our communities and our city.

- **Keep Everyone Safe:** We watch out for one another and work in ways that eliminate injuries. We always take the steps needed to ensure the safety of the patients in our care.
- **Work Together:** We work together, respect each other, and communicate effectively in order to meet challenges, solve problems, and reach NYC Health + Hospitals' goals. We all share responsibility for patient care, for safety, for controlling costs, and, ultimately, for fulfilling NYC Health + Hospitals' mission.
- **Pursue Excellence:** We adapt to changes, we innovate. We continuously review our work, revise work processes, and eliminate waste. We work to the highest standards of integrity, quality, and safety. Breakthrough, with its ability to engage staff at all levels, is our path to excellence.
- **Manage Your Resources:** We are accountable for what we do and how we do it. We look for ways to save money; use time, effort, and materials wisely; and work efficiently. To sustain the mission of NYC Health + Hospitals, we make every dollar count; we think about the cost consequences of our decisions.
- **Keep Learning:** We learn in order to grow as individuals; we incorporate the lessons we learn into our daily work to reach the highest levels of personal potential and team success. Our employees are our most valuable resource, and NYC Health + Hospitals supports professional training and development, expansion of skills, and opportunity for all staff.



SECTION III: PROJECT DESCRIPTION, BACKGROUND AND OBJECTIVES

The New York City Health + Hospitals (NYC Health + Hospitals) exists to provide healthcare to all New Yorkers without exception. To assure NYC Health + Hospitals' ability to meet this mission now and into the future, NYC Health + Hospitals has embarked on a system-wide transformation and streamlining of its organizational structure and processes. As part of this transformation, NYC Health + Hospitals is centralizing its decentralized back office administrative functions and modernizing workflows via implementation of PeopleSoft ERP.

NYC Health + Hospitals is seeking a vendor with demonstrated experience in the area of Time Collection devices that integrate directly into PeopleSoft ERP. Under this Request for Proposal ("RFP"), NYC Health + Hospitals is seeking a vendor to provide the implementation of an enterprise wide time collection device system. The solution should be paperless and state of the art.

NYC Health + Hospitals will only contract with vendors that do not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability, marital status, sexual orientation or citizenship status with respect to all employment decisions. NYC Health + Hospitals encourages women and minority owned businesses to submit proposals in response to this solicitation.

The ultimate decision for selecting a vendor shall be made by an evaluation committee using the criteria included in this solicitation.

PROJECT BENEFITS

Below are listed some of the projected benefits of the new ERP implementation – including Time Collection devices:

1. **Integrated systems.** Integration that allows for sharing information, enterprise-wide staff time and cost reporting, reduced data entry and improved internal controls;
2. **Improved reporting, forecasting, and planning.** Improved staff reporting, forecasting, and planning to achieve a performance management based system of budgeting for outcomes and reporting its financial results;
3. **Increased efficiencies.** Improved overall efficiencies in the NYC Health + Hospital's operations by offering greater functionality and supporting best practices across financial, procurement, payroll and human resources operations;
4. **Eliminate redundant data entry.** Reduced redundant data entry to cut staff time by eliminating the need to enter the same or similar data multiple times into different systems;
5. **Eliminate reliance on paper-based processes.** Reduced use of paper for timesheets and supporting documents to cut costs for purchasing paper, increase data security, enhance data integrity and reduce storage costs;
6. **Reduced reliance on legacy and custom developed systems.** Shifting from legacy and custom systems to allow for improved support and streamlined system upgrade processes to

help ensure systems stay up-to-date and allow for more integration opportunities with other systems;

7. A system that is “user-friendly.” User friendly systems reduce the need for costly and time consuming training.

3.1 INTRODUCTION

New York City Health and Hospital Corporation, hereinafter referred to as “NYC Health + Hospitals”, as represented by NYC Health + Hospitals Enterprise Information Technology Services (EITS) and Finance departments, is soliciting proposals for Time Collection Devices/methodology that integrate with PeopleSoft ERP. The Selected Vendor will bring expertise and best practices to this project for time collection. It is our intent to fully utilize the PeopleSoft Time and Labor module to manage all time keeping edits and to prepare for payroll processing. The selected vendor will provide the hardware to collect time and other information.

NYC HHC has over 35,000 employees and 15,000 non-employees. Non-employees are made up of temporary nurses, affiliate Doctors, and volunteers. Over 25 collective bargaining units are represented within the workforce.

3.2 CURRENT APPLICATIONS

The PeopleSoft ERP system rolled out its’ first go-live July 1, 2017 with Financials and Supply Chain. All locations will be utilizing PeopleSoft Financials and Supply Chain by June 2018. NYC Health + Hospitals has used PeopleSoft HCM for Human Resources, ELM and TAM for the last 5 years. There were multiple mainframe systems in use for over 30 years before this implementation.

In January 2018, the implementation of PeopleSoft Payroll and Time and Labor will begin, with Deloitte Consulting as the implementation partner and we expect to go-live on PeopleSoft Payroll in January 2019. Clairvia Nurse and Physician Scheduling is expected to follow the time and labor roll out, with Cerner Consulting as the lead. These applications are scheduled to go live January 2019 with Clairvia and time collection rolling out across the organization during 2019.

NYC Health + Hospitals utilizes a highly customized version of ISI Payroll and a homegrown time calculation system referred to as ATLS. Time is collected on paper timesheets on a weekly basis and manually keyed or scanned into the Automated Time and Leave System (“ATLS”). These legacy applications run on an IBM Mainframe Z10-BC.

NYC Health + Hospitals currently utilizes PeopleSoft Human Capital Management (HCM) V9.2 for tracking of employees and non-employees, TAM, ELM, Benefits, ESS and MSS. It is running on an IBM P Series Enterprise Servers.

3.2.1 CURRENT TIME COLLECTION

Currently, weekly paper timesheets are pre-printed and distributed that include some basic employee information. These timesheets are distributed to employees who write down what time they arrive and depart from work and add any additional codes that ATLS may need. (For Example: excess hours over scheduled, jury duty, Annual Leave day, etc.) The employee signs and gives this sheet to their manager for approval. The manager physically signs and then sends the paperwork to payroll to be manually keyed or scanned into ATLS for processing.

3.2.2 WHAT WAS PURCHASED

NYC Health + Hospitals has purchased and plans on implementing the following PeopleSoft suites/modules: (Note: The Software was purchased through a separate solicitation.)

- Financials – went live 7/1/2017
 - General Ledger
 - Accounts Payable
 - Treasury/Cash Management
 - Project Costing
 - Budget – Hyperion
 - Cost Accounting - Hyperion
- Supply Chain Management – went live 7/1/2017
 - Purchasing
 - eProcurement
 - Inventory
- Asset Life Cycle Management (ALM) – went live 7/1/2017
- Enterprise Service Automation (ESA)
- Human Capital Management (HCM) – added Payroll, Absence Management, Time and Labor, In-memory labor rules and monitoring to our current HCM package
- Governance, Risk, and Compliance Application
- UPKs – for all mentioned PeopleSoft modules
- Hyperion – For Budget and Cost Accounting
 - Planning Plus
 - Public Sector Planning and Budgeting – went live 7/1/2017
 - Profitability and Cost Management
 - Financial Data Quality Management
- Clairvia Nurse and Physician Scheduling

SECTION IV: STATEMENT OF WORK

A. STATEMENT OF WORK

At NYC Health + Hospitals we have a wide variety of employees and therefore would consider different time collection solutions for different types of employees. We are relying on the vendor to bring best practice methodology based on past hospital and PeopleSoft experience.

Types of Personnel:

- 24 hour/multi-shift workers – Nurses, Doctors, Cleaning
- Full Time Salaried workers
- Full Time Hourly Workers
- Part-time Salaried workers
- Part-time Hourly workers
- Pay per Visit
- Off-site or remote work
- Non-Employees – Volunteers, Affiliated clinical/nonclinical staff, Temp Nurses

Please present multiple solutions for time collection. Please include the following information for each type of collection device: (Part of Form B1)

1. Define any information that may be stored on the device. Employee data, punch data, etc.
2. Does the device have a back-up battery?
3. Can the device be polled or can it instantly update PeopleSoft?
4. Can the device support division/department and job changes with entry at the device?
5. Collection devices (bio or card, etc.) should have an audible sound and/or visual signal that indicates a successful or unsuccessful punch and have a message display that verifies that the punch registered.
6. Can the devices be synchronized for all time capturing based on the server time?
7. Define how employees would access additional information or transactions – like time approval, time accrual balances, vacation requests, submittal of time, etc.
8. Does the device need to be hard wired or can it send the information wirelessly?
9. What is the useful life of the device?
10. What type of maintenance is required to keep device operational?

B. EASE OF USE

The devices should be easy to use to ensure adoption, compliance, accuracy, and with minimal disruption to shift changes and daily workflow of staff. Device should notify the user that there time in/out was recorded and any necessary prompts.

C. INTEGRATION

The devices proposed by the vendor should integrate seamlessly with PeopleSoft HCM module.

D. PROJECT TIMELINE

PeopleSoft Payroll and Time and Labor software implementation will begin in January 2018 with a current go-live date of January 2019 for all of payroll. The Time and Labor module will be implemented throughout NYC Health + Hospitals in early 2019 with a completion date by or prior to January 2020.

Time collection devices will need to be installed in 2018 for use with the PeopleSoft Time & Labor software that is going live in January 2019. Our current plan is to rollout the Time & Labor module in multi-facility Waves during 2019. This means the collection methodology will need to be designed and available by June 2018 so that installation can begin based on the Waves. We are looking to the selected vendor to help with best practices for rolling out time collection. (How many people/sites at a time? How much time in between roll outs? How many devices based on number of users/entrances/work locations/start times/etc.?)

SECTION V: DIVERSITY

EEO Process

NYC Health + Hospitals Board of Directors adopted Mayor's Executive Order 50 of 1980 and requires that all vendors comply with the process. Please complete the attached Supply and Service Employment Report in accordance with the instructions attached thereto.

MWBE Participation

Background:

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women owned business enterprises (MWBEs) had a full and fair opportunity to participate in state contracting. The findings were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York". As a result of the findings therein the State enacted New York State Executive Law Article 15-A, which requires, among other things, that agencies establish goals for maximum feasible participation of New York State Certified MWBEs.

Participation Goals:

The System hereby establishes an overall goal of 30% for MWBE participation for this solicitation.

Finding MWBEs:

A searchable directory of New York State Certified MWBEs can be viewed at:

<https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=1989>

MWBE Utilization Plan:

Vendor shall submit an MWBE Utilization Plan along with the proposal (attached) setting forth the MWBEs it intends to utilize if a contract is awarded. The System will review the MWBE Utilization Plan and advise the selected vendor whether the Utilization Plan is acceptable or issue a notice of deficiency. If the vendor cannot in good faith meet the MWBE goals, a waiver may be submitted setting forth a good faith basis the reasons therefor.

Reporting:

The awarded vendor shall submit monthly utilization reports via the System's online reporting system.

Failure to Comply:

Failure to provide an MWBE Utilization Plan, or take good faith efforts in complying with the diversity participation process is grounds for disqualification of award of a contract or breach of contract.

SECTION VI: PROPOSAL PROCEDURES AND REQUIREMENTS

A. PROPOSER PRE-BID QUESTIONS

Please submit your questions about the proposal and or the requirements in Section III using Attachment 1 – Pre-Bid Questions. This must be submitted via e-mail by October 4, 2017. These questions should be sent to Hilary Miller. E-mail – hilary.miller@nychhc.org

B. PROPOSAL PACKAGE

Firms interested in responding to this solicitation must submit a proposal package with the following elements in the order listed below:

1. Cover Letter and Title Page: Complete and submit Exhibit One and Exhibit Two. Be sure to include all the information requested.
2. Executive Summary: The One (1) page summary should encapsulate the plan of action or approach to the requirements of this solicitation, deliverables, and a summary of the cost information. Firms should also highlight its capabilities to meet NYC Health + Hospitals minimum requirements in Section III.
3. Table of Contents: The table of contents should facilitate locating all key points in the proposal.
4. Firm's Background and Organization: In this section provide the following information about the interested company:
 - a) Size of the company
 - b) Organization chart
 - c) Financial capacity (an audited financial statement for the last 3 fiscal years)
 - d) Background of principals
 - e) Recently completed similar size projects
 - f) List of current clients as references (must provide five (5) contact names with email addresses and phone numbers.)
 - g) Any licenses relevant to this project
 - h) Duration the company has been doing business in this service or product line
5. Subcontractors: In this section provide the following information about the subcontractors:
 - a. Provide resumes for subcontractor personnel assigned to the project, demonstrating the individual(s) knowledge, ability and experience as it relates to the project to be completed.
 - b. Documented experience of the subcontractor in successfully performing work on projects of a similar size and scope to that required by this RFP.
6. Technical Proposal: The interested firm must submit a narrative that addresses the requests in Section IV Statement of Work, its plan to execute the requirements of the RFP and the following:

- **Experience-** Describe the successful relevant experience of the proposer in providing the work described in Section IV- Statement of Work of the RFP. In addition, provide the following:
 - Describe vendor's experience implementing Time Capture Devices within two (2) healthcare integrated delivery network (IDN) systems each with a minimum of 10 locations during the past three (3) calendar years.
 - Describe proposer's experience integrating with PeopleSoft HCM and Time and Labor and experience, if any, with integrations with Clairvia nurse and/or physician scheduling module.
 - **Personnel-** Attach for each key staff position a resume and/or description of the qualifications that will be required.
 - **Organizational Capability-** Demonstrate the proposer's organizational (i.e. programmatic, technical, managerial and financial) capability to perform the work described in Section IV- Statement of Work of the RFP. Proposers must submit their organization's statement of financial position for the previous fiscal year, including their statement of activities and auditor's report.
 - **Statement of Work-** Describe in detail how the proposer will provide the services described in Section IV- Statement of Work of the RFP, and demonstrate that the proposer's proposed approach will fulfill CHS goals and objectives.
7. Cost Proposal: Cost submission should be based on all the requirements of the RFP. See attached Form B-1.
- a. Please submit pricing by solution – we understand you may have multiple solutions to recommend. Costing proposal should be scalable to increase or decrease number of devices required. Explain costing methodology, including but not limited to devices needed by population size/staffing traffic and cost per device and other associated expenses.
 - b. Proposer must include any and all costs to implement their product(s) as an integrated solution with PeopleSoft HCM.
 - c. All expenses to be charged to NYC Health + Hospitals are to be detailed. NYC Health + Hospitals will not separately pay for travel and associated travel expenses.
8. Diversity Participation: The proposer shall submit a completed M/WBE Utilization Plan in accordance with Section V above.
9. Indication of Acceptance of the Terms and Conditions: Affirmatively indicate your acceptance of the terms and conditions. Otherwise, any exceptions to the General Contract Provisions, set forth in Attachment B, must be stated in this section and proposed revised language provided, otherwise any objections will be deemed waived. Responders are cautioned that any exceptions to the terms of the standard State contract which give the Responder a material advantage over other Responders may result in the Responder's Proposal being declared nonresponsive. Proposals

being declared nonresponsive will receive no further consideration for award of the Contract. Also, Proposals that take blanket exception to all or substantially all boilerplate contract provisions will be considered nonresponsive Proposals and rejected from further consideration for contract award.

10. Doing Business Data Form (“DBDF”): As required by law, the proposer must submit an accurate and complete DBDF, enclosed in a separate envelope. Failure to do so will result in a non-responsive proposal and rejection of the proposal.
11. Business Associate Agreement (“BAA”): The selected vendor must submit a signed copy of the System’s business associate agreement if the System determines that it is required for compliance with the privacy standards and other requirements relating to protected health information as defined in the administrative simplification provisions of the Health Insurance Portability and Accountability Act of 1996. **No modifications may be made to the BAA, which, if required, is non-negotiable and must be executed as drafted.**
12. Confidential/Proprietary Information: Proposers should include in their response a section entitled “Confidential, Proprietary Information or Trade Secrets” if the proposal contains any such information, indicating the exact location in the proposal of all information claimed by the firm to be confidential or trade secrets. The firm shall also provide a justification as to why such material, upon request, should not be disclosed by the System. Such information deemed by the proposer to be confidential/proprietary shall be easily separable from the non-confidential or non-proprietary sections of the proposal.

C. PROPOSAL PACKAGE SUBMISSION REQUIREMENTS

1. Proposals are due on or before **October 18, 2017 at or before 3:00 pm** at the location prescribed in Section I - RFP TIMETABLE. Proposals that are late or unsealed will not be considered. The System reserves the right to accept late proposals when it is in the best interest of the System and the lateness of the proposal is deemed non-material.
2. Proposers shall be responsible for informing commercial delivery service, of all delivery requirements and for ensuring that the information required in item 5, below, appears on the outer envelope used by such service. Proposals must be delivered via common carrier. Signature required and time stamped.
3. Proposers shall submit one original paper copy along with one (1) flash drive/CD-ROM containing the proposal. Please see Attachment A for the required items. Only one (1) original DBDF needs to be submitted, but must be provided in an envelope separate from the rest of the proposal.

4. Proposers are advised that there is a 15 - page limitation for proposals as it pertains to the technical proposal. This limitation does not include the Executive Summary, exhibits or other attachments.
5. The outer envelope, which must be sealed, enclosing any materials submitted in response to this RFP shall be addressed as follows:

FROM: Proposer Name/Address

TO: Attention: **Hilary Miller**
Manager of Administration
New York City Health and Hospitals
Enterprise Information Technology Services
55 Water Street, 24th Floor
New York, NY 10014
DOC control#: DCN-2284
RFP Title: Enterprise-wide Time Collection Devices

Attachment A: Proposal Package Checklist, which itemizes each component/document that is to be submitted as part of the Proposal Package, has been attached for the proposer's convenience.

D. PROPOSAL EVALUATION PROCEDURES

1. Evaluation Committee

- a. The Evaluation Committee shall evaluate the components of this solicitation. The Evaluation Committee shall evaluate and rate all proposals meeting the Minimum Qualification Requirements. All proposals will be evaluated in accordance with the criteria described in Section V(C) (3).
- b. The Evaluation Committee will make a determination to: 1) award a contract based on initial proposals from all or a "short list" of proposers; or 2) conduct discussions/negotiations with all or a "short list" of proposers.
- c. The Division may require proposers to give oral or visual presentations in support of their proposals or to exhibit or otherwise demonstrate the information contained therein.

These presentations will be no longer than 3 hours in length and should include:

- i. Company Overview and Experience

- ii. Detailed Proposal Review
 - 1. Device Review
 - 2. Functionality Review
 - 3. Cost Review

- d. If it is in the best interest of the System, the Evaluation Committee reserves the right to waive or modify any mistakes in proposals that are deemed by the Evaluation Committee to be not material.

- e. A contract shall be awarded to the highest rated proposer based on the evaluation factors set forth in the RFP subject to the System’s right to reject all proposals.

- 2. Minimum Qualification Requirements: Proposals must be responsive to all the material requirements of the RFP. Proposals that do not meet the minimum requirements stated in “Section III” will not be reviewed by the selection Committee. Minimum requirements must be provided in the executive summary as requested in the Proposal Package above.

- 3. Evaluation Criteria: Proposals must be responsive to all the material requirements of the RFP. The Committee will evaluate and rate the proposals of qualified firms on their technical merits by applying the Evaluation Criteria below to the score sheet provided on “Attachment C”.

Criteria	Weight
1. Healthcare Experience	20%
2. Solution Functionality/PeopleSoft Integration	30%
3. Total Cost of Proposed Solution	30%
4. Vendor Suitability and Approach	10%
5. Employee Ease of Use/Accuracy	10%

SECTION VII: CONTRACT AND PAYMENT

A. TERM OF CONTRACT

1. The term of the contract shall be for a 3 year period.

B. PAYMENT

1. The selected firm shall be paid on a net 90 basis.

SECTION VIII: GENERAL INFORMATION

A. STATUS OF INFORMATION

1. The System shall not be bound by any oral or written information released prior to the issuance of the RFP.
2. The System shall not be bound by any oral or written representations, statements or explanations other than those made 1) in this RFP or 2) in formal written addenda issued to this RFP.

B. COMMUNICATION WITH THE SYSTEM

1. Proposers are advised that, from the date this RFP is issued until the award of the contract, contact with System or its personnel related to this solicitation is not permitted, except with RFP Team Contact who has been designated as the contact person listed on the cover page of this RFP.

C. PROPOSER INQUIRIES

1. All inquiries regarding this solicitation shall be addressed to the contact person named in this proposal. All substantive questions should be emailed to the contact person. The contact person may orally respond to inquiries of a non substantive nature or submit responses by email. However written responses are not mandatory.
2. Proposers are advised that NYC Health + Hospitals will not provide response to inquiries submitted after proposers question due date.

D. ADDENDA TO THE RFP

1. NYC Health + Hospitals shall issue responses to inquiries related to substantive issues and any other corrections or amendments to the RFP it deems necessary prior to the Proposal Due Date in the form of written addenda.
2. It is the proposer's responsibility to assure receipt of all addenda. The proposer should verify with the designated contact person prior to submitting a proposal that all addenda have been received, and shall acknowledge in the transmittal letter the number of addenda issued.

E. MODIFIED PROPOSALS

1. A proposer may submit a modified proposal to replace all or any portion of a previously submitted proposal up until the Proposal Due Date and Time.
2. The Evaluation Committee shall consider only the latest timely version of the proposal.

F. PROPOSER'S OFFER

1. A proposal may be withdrawn in writing only prior to the Proposal Due Date and Time.

2. A proposer's offer shall be irrevocable until contract award.

G. LATENESS

1. Proposals received after the Proposal Due Date and Time are late and shall not be considered, except that the System reserves the right to accept late proposals if the lateness of the proposal is deemed non-material.
2. Modifications and Withdrawals received after the Proposal Due Date and Time are late and shall not be considered.

H. COSTS INCURRED BY PROPOSERS

1. The System shall not be liable for any costs incurred by proposers in the preparation of proposals or for any work performed in connection therewith.

I. DISCUSSIONS/NEGOTIATIONS

1. The System reserves the right to award a contract on the basis of initial offers received, without discussions. Therefore, each initial offer should contain the proposer's best terms from a technical and cost standpoint.

J. CONTRACT AWARD

1. The System reserves the right to award a contract to a firm other than the proposer offering the lowest overall cost.
2. The contract resulting from this solicitation shall be awarded to the highest rated responsible proposer based on the evaluation factors set forth in the RFP. The award of a contract does not commit the System to use the equipment or services of the selected firm.
3. Any proposed contract award shall be subject to all required internal approvals and due diligence.

K. RFP POSTPONEMENT/CANCELLATION

1. The System reserves the right to postpone or cancel this RFP and to reject all proposals.

ATTACHMENT “A” – PROPOSAL PACKAGE CHECKLIST

I. Sealed Envelope (addressed as set forth in section V.B.5 of the RFP)

One (1) set of originals along with one (1) flash drive/CD-ROM and 12 copies containing the Proposal Package that includes each of the following documents:

- Proposal Cover Letter (Exhibit One)
- Title Page (Exhibit Two)
- Executive Summary
- Table of Contents
- Narrative
- Technical Proposal
- Cost Proposal
- Acknowledgment of Addenda, if any
- Acceptance of Terms and Conditions
- Doing Business Data Form
- Business Associate Agreement (if required)
- MWBE Utilization Plan
- Supply and Service Employment Report
- W-9 Form

II. Outer Sealed Envelope (Addressed as set forth in section V.B.5 of the RFP).

LATE OR UNSEALED PROPOSALS WILL NOT BE CONSIDERED UNLESS THE SYSTEM DEEMS IT TO BE IN THE BEST INTEREST OF THE SYSTEM AND THE LATENESS OF THE PROPOSAL IS DEEMED NON-MATERIAL.

FROM: Proposer Name / Address

TO:

NYC Health + Hospitals – Enterprise Information Technology Services

Attention: Ms. Hilary Miller

Manager of Administration

55 Water Street

New York, NY 10041

Document Control #: DCN-2284

ATTACHMENT “B” – REQUIRED DOCUMENTS

The following forms are provided as attachments to this RFP:

1. Doing Business Data Form
2. BAA
3. MWBE Utilization Plan
4. Supply and Service Report
5. Vendex

<http://www.nychealthandhospitals.org/standard-vendor-forms/>

ATTACHMENT “C” – SAMPLE SCORE SHEET

Sample Score Sheet:

EVALUATION FORMS SUMMARY:														
Community Re-entry Assistance Network (CRAN)														
Vendor	(1) Experience			(2) Implementation/SPOE Plan			(3) Staffing/Location/Office Hours			(4) Cost of Proposal			Total Score	Rank
	Weight	Score*	Wtd Score	Weight	Score*	Wtd Score	Weight	Score*	Wtd Score	Weight	Score*	Wtd Score		
* A rating of 1 through 10 (10 being the highest) is required for each criteria under each vendor.														
Name of Evaluation Committee Member (Please Print):														
Signature of Evaluation Committee Member:														
Date:														



EXHIBIT ONE – COVER LETTER

FIRM:

ADDRESS:

CITY/STATE/ZIP CODE:

ADDENDA RECEIVED: _____ (list number of addenda)

SIGNATURE:

DATE:

EXHIBIT TWO – TITLE PAGE

RFP TITLE: _____

COMPANY NAME: _____

FEIN: _____

ADDRESS: _____

CITY/STATE/ZIPCODE: _____

PRINCIPAL CONTACT: _____

PHONE: _____

EMAIL: _____