



Carrie Eklund
Central Services Manager
Finance Department

**REQUEST FOR INFORMATION
WELLNESS CLINIC
RFI NO.: 712-HR-082**

7/11/12

Name of Bidding Firm: _____

Address _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail: _____

RFI Opening Time and Date 11:00 a.m., Local Time, Tuesday, August 7, 2012

Bids will be accepted until the specified opening time and date. Any bidder attempting to deliver after the opening time and date will be refused.

ABOUT THIS DOCUMENT

This document is a Request for Information. The issuance of this RFI is for informational purposes for staff only, and will not result in the award of a contract. The RFI process will often result in a separate RFP or Bid process, as once the City has sufficient information to develop specifications, the more formal processes are then used to create a contract. Participation in the RFI process is voluntary and does not give vendors an unfair advantage in the resulting procurement process.

PLEASE MARK THE RETURN SEALED ENVELOPE:

1. RFI Opening Date and Time
2. Title of RFI
3. RFI Number

RETURN INFORMATION TO:

City of Rockford
Central Services Manager
425 East State Street, 4th Floor
Rockford, Illinois 61104
Telephone: (815) 987-5560

BIDS SUBMITTED BY FASCIMILE OR E-MAIL WILL NOT BE ACCEPTED

BID RESULTS:

Bid results may be obtained by telephone at (815) 987-5560, by fax at (800) 380-7174 or at www.rockfordil.gov

CITY OF ROCKFORD, ILLINOIS—BIDDING GENERAL CONDITIONS

1. Pricing. The bidder shall insert price for all bid items and all other information requested in these specifications. The price shall be the *full, delivered cost* to the City of Rockford with no additions.
2. Total versus “Per Item” Awards. The City generally awards contracts based on a lump sum basis to the lowest responsible and responsive bidder. However, the City may choose to award on a per item basis. Therefore, each bidder must submit pricing for each item indicated on the bid forms. Bidders must clearly indicate which items are bid and which are not.
3. Delivery of Merchandise. Delivery terms will always be Freight On Board (FOB)—Destination. The City of Rockford accepts no responsibility for the condition of any merchandise purchased prior to acceptance by City Personnel. Failure to comply with this requirement may constitute rejection of the bid.
4. Acceptance of Merchandise at Delivery. The City of Rockford reserves the right to refuse acceptance of delivered merchandise that differs substantially from the specifications in this invitation to bid or as otherwise permitted by Illinois law.
5. Prompt Payment Act. The City of Rockford intends to comply with the governmental prompt payment act. The awarded vendor will be paid upon submission of invoices to: City of Rockford Accounts Payable, 425 East State Street, Rockford, IL 61104.
6. W-9 Request for Taxpayer Identification Number. Prior to issuance of a purchase order, the successful bidder will be required to supply the City of Rockford with a federal W-9 Request for Taxpayer Identification Number and Certification. Failure to comply with this requirement will be considered a violation of contract terms, for which the City may bar the vendor from bidding for a period of up to three years.
7. Legal Compliance. The vendor awarded this contract will comply with all Federal, State, County, and City laws, ordinances, rules and regulations, which in any manner affect the product or service placed for bid herein. Lack of knowledge on the part of the awarded vendor of applicable law will in no way be cause for release of this obligation. If the City becomes aware of violation of any laws, ordinances, rules and regulations on the part of the awarded vendor, it reserves the right to reject any bid, cancel any contract, and pursue any other legal remedies deemed necessary.
8. Legal Requirements. This contract sets forth the entire final agreement between the City of Rockford and the bidder and shall govern the respective duties and obligations of the parties. The validity of this contract, and any disputes arising from the contract, shall be governed by the laws of the State of Illinois. Any litigation under this agreement shall be resolved in the trial courts of Winnebago County, State of Illinois. Should a provision of this contract be declared invalid by a court of competent jurisdiction, it shall not affect the validity of the remaining provisions of the contract.
9. Safety. Prevention of accidents at any project is the sole responsibility of the awarded vendor and its subcontractors, agents, and employees. The awarded vendor, its subcontractors, agents, and employees shall be fully and solely responsible for the safety of this project. The awarded vendor shall retain exclusive and direct control over the acts or omissions of its subcontractors, agents and employees, and any other persons performing portions of the work and not directly employed by the awarded vendor.

10. Criminal Background Check. When necessary for the protection of citizens and/or City staff, the City may require an awarded vendor to conduct a criminal background check on all of its personnel who will have direct contact with City facilities or residents/businesses served under this contract. Personnel are defined as representatives, agents, employees, subcontractors, or anyone else who will be utilized to fulfill obligations under this contract. Criminal background checks, at a minimum, shall consist of a county level felony and misdemeanor check for each county in which the personnel resided in the last 10 years. The awarded vendor shall notify the City of any of its personnel who have been convicted of a felony or misdemeanor prior to commencing any work under this contract. At the City's discretion, personnel with any felony or misdemeanor convictions which raise a concern about the safety of building, property, or City staff/resident's personal security, or is otherwise job related (as determined by the City) shall not perform work under this contract. Once given notice that a background check(s) will be required, it must be completed within 14 calendar days so as to not delay work to be completed.

11. Control of the Work. With respect to the awarded vendor's own work, the City shall not have contractual, operational, and/or supervisory control over and/or charge of the work and shall not be responsible for construction means, methods, techniques, sequences, procedures, and programs in connection with the awarded vendor's work, since these are solely the vendor's responsibility under the agreement. The City shall not be responsible for the awarded vendor's failure to carry out the work in accordance with the agreement's terms and conditions. The City shall not have control over and/or charge of acts or omissions of the awarded vendor, its subcontractors, and/or their agents or employees, or any other person performing portions of the work not directly employed by the awarded vendor. The awarded vendor shall be considered to be an "independent contractor" pursuant to Illinois law.

12. Bid Bond. When required on the cover sheet, a bid bond for not less than 5 percent of the bid amount must accompany all bids as a guarantee that if the bid is accepted, the bidder will execute and file the proper contract. A bank cashier's check, bank draft, or certified check equal to the amount specified is acceptable in lieu of a bid bond. Bid bonds of the two lowest firms will be retained until the contract is awarded.

13. Performance Bond. When required by the specifications herein, the awarded vendor shall furnish a performance bond equal to the amount of the contract, acceptable to the City, within 14 calendar days after notification of contract award. Failure to furnish the required bond within the time specified may be cause for rejection of the bid and any bid deposit may be retained by the City as liquidated damages and not as a penalty.

14. Taxes. No charge will be allowed for taxes from which the City of Rockford, Illinois is exempt. The City of Rockford, Illinois is not liable for the Illinois Retailers' Occupation Tax, the Service Occupation Tax or the Service Use Tax. The City is exempt from the Federal Excise and Transportation Tax.

15. Withdrawal of Bids. Firms may withdraw or cancel their bids at any time prior to the advertised invitation to bid opening. After the opening time, no bid shall be withdrawn or cancelled. All bids shall be firm and valid for a period of sixty (60) calendar days. If a bidder to whom a contract is awarded refuses to accept the award, the City may, at its discretion, suspend the bidder for a period of time up to three (3) years.

16. Subcontracting. The bidder shall provide information for all subcontractors, leased operators/equipment, and suppliers and all other information requested in the Subcontractor and Supplier Detail Forms attached. Requests for deviations from the completed detail forms submitted must be made in writing, and reviewed and approved by the City's Diversity Procurement Officer and the Central Services Manager or designee. The awarded vendor may not subcontract any portion of the contract after award without written consent of the City of Rockford

Central Services Manager. When subcontractors are used, the awarded vendor is required to pay subcontractors promptly after completion of work. Delay of payment is prohibited.

17. Termination of Contract. The City of Rockford reserves the right to terminate the contract in its entirety or in portions, upon written notice to the awarded vendor, if the Rockford City Council does not appropriate sufficient funds to complete the contract or in the event of default by the awarded vendor. Default is defined as failure of the awarded vendor to perform any of the provisions of this contract or failure to make sufficient progress so as to endanger performance of this contract in accordance with its terms. In the event of default, the City may purchase the product(s) and/or service(s) from other sources and hold the defaulting company responsible for any excess costs occasioned thereby. The City may require payment of liquidated damages for non-performance. Should default be due to failure to perform or because of a request for a price increase, the City reserves the right to remove the firm from the City's bidder list for a period of up to three years.

18. Late Bids and Proposals. Regardless of cause, late bids and proposals will not be accepted and will automatically be disqualified from further consideration. It shall be solely the vendor's risk to ensure delivery at the designated office by the designated time. Late bids and proposals will not be opened and may be returned to the awarded vendor at their request and expense.

19. EEO Forms. Each firm shall be required to submit with its bid information all EEO forms included in the invitation to bid package. Any bid which fails to include the properly completed compliance items will not be read and will not be considered. All subcontractors shall also be required to comply with the same EEO forms as the firm.

20. Restrictive or Ambiguous Specifications. It is the responsibility of the bidding firm to review the invitation to bid specifications and to notify the Central Services Manager if the specifications are formulated in a manner that would unnecessarily restrict competition. Any such protest or question regarding the specifications or invitation to bid procedures must be received by the Central Services Division not less than seventy-two hours prior to the time set for the opening. In the event a contract term is not defined within the contract document, the term will be given its ordinary dictionary definition.

21. Bid Protest. Firms wishing to protest bids or awards shall notify the Central Services Manager in writing within 7 days after the invitation to bid opening. The notification should include the bid number, the name of the firm protesting, and the reason why the firm is protesting the bid. The Central Services Manager will respond to the protest within seven (7) calendar days. A successful protest may result in the reversal of a previously awarded contract.

22. Disputes. In case of disputes as to whether or not an item or service quoted or delivered meets specifications, the decision of the Central Services Manager, or authorized representative shall be final and binding to all parties. The Central Services Manager has the right to waive technicalities as they see fit. The Central Services Manager may request a written recommendation from the head of the department using the equipment or service being procured.

23. Exceptions. Any deviations from these specifications shall be noted and submitted with the bid. Failure to address deviations from specifications may result in bid rejection.

24. Acceptance/Rejection of Bids. The City of Rockford reserves the right to accept or reject any or all bids or proposals at any time, for any reason, including but not limited to the Rockford City Council not appropriating

sufficient funds to purchase equipment or complete the contract. The City may make awards in any manner deemed in the best interest of the City.

25. Prevailing Wage. When indicated on the cover page of this document, this contract calls for the construction of a "public work," within the meaning of the Illinois Prevailing Wage Act, 820 ILCS 130/.01 *et seq.* ("the Act"). The Act requires awarded vendors and subcontractors to pay laborers, workers, and mechanics performing services on public works projects no less than the "prevailing rate of wages" (hourly cash wages plus fringe benefits) in the county where the work is performed. When required, awarded vendors are responsible for paying current prevailing wage rates, as posted on the Illinois Department of Labor's website at: <http://www.state.il.us/agency/idol/rates/rates.HTM>. It is the awarded vendor's responsibility to verify current wage rates, as they are updated monthly. All awarded vendors and subcontractors rendering services under this contract must comply with all requirements of the Act, including but not limited to, all wage, notice, and record keeping duties.

26. Certified Payroll. All Certified Payroll reports required to be submitted under the Prevailing Wage Act, 820 ILCS 130, must be submitted monthly via email, in Excel or some format compatible with Excel, to certified.payroll@rockfordil.gov.

27. Substance Abuse Prevention. When required by Illinois State Statutes, awarded vendors must have in place and file with the City a written program for prevention of substance abuse among its employees. This program must include pre-hire, random, reasonable suspicion, and post-accident drug and alcohol testing, as required by the Substance Abuse Prevention on Public Works Projects Act.

28. Apprenticeship Requirement. For construction contracts over \$50,000, awarded vendors must participate in apprenticeship and training programs approved and registered with the United States Department of Labor's Bureau of Apprenticeship and Training for all Trades that will be in the awarded vendor's (or his subcontractor's) employment, with each worker receiving the required apprenticeship/training appropriate to his trade. Owners or work performed by owners is not exempt from the apprenticeship and training requirement.

29. Indemnification. To the fullest extent permitted by law, the awarded vendor shall indemnify and hold harmless the City, its officers, representatives, elected and appointed officials, agents, and employees from and against all claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from the awarded vendor's performance of work under this agreement, and indemnifies and agrees to defend and hold harmless the City against any and all losses, claims, damages, and expenses arising from the work performed hereunder of the erection, construction, placement, or operation of any scaffold, hoist, crane, stay, ladder, support, or other mechanical contrivance in connection with such work including but not limited to losses, claims, damages, and expenses arising pursuant to claims asserted against the City pursuant to theories premised upon section 414 of the Restatement (Second) of Torts and section 343 of the Restatement (Second) of Torts.

This indemnification agreement shall not be limited in any way by any limitations on the amount or type of damages, compensation, or benefits payable by or for the awarded vendor under Worker's Compensation Acts, disability benefit acts, or other employee benefit acts, and serves as an express agreement to waive the protection of *Kotecki v. Cyclops Welding Corp.*, 146 Ill.2d 155, 585 N.E.2d 1023 (1991) in Illinois.

Further, the awarded vendor agrees that it is solely responsible for compliance with all safety laws applicable to the work performed hereunder, including but not limited to the Occupational Safety and Health Act of 1970 and the Construction Safety Act of 1960 and all standards and regulations which have been or shall be promulgated by the agencies which administer the Acts.

Under no circumstances shall the awarded vendor, its subcontractors, agents, and employees be required to indemnify the City for its own negligence.

30. Officers. Each bidder affirms, by submission of a response to this bid or request for proposals, that no officer of the City of Rockford, Illinois, is directly or indirectly interested in the proposal for any reason of personal gain.

31. Non-Waiver. The failure by the City to require performance of any provision shall not affect the City's right to require performance at any time thereafter, nor shall a waiver of any breach or default of this contract constitute a waiver of any subsequent breach or default or a waiver of the provision itself.

32. Professional Services Selection Act. The City of Rockford intends to comply with 50 ILCS 510/5 governing the selection of professional services. Any reference in these terms and conditions to supplying pricing or price as a determining factor in selection do not apply for services covered by said act.

33. The City of Rockford reserves the right to accept or reject any and all proposals and to waive technicalities in submitted bids.

**BID REQUIREMENTS FOR
EQUAL EMPLOYMENT OPPORTUNITY**

All bidders seeking to do business with the City of Rockford are **REQUIRED** to submit with any formal, sealed bid all of the following documents and information, attached herewith, completed and signed:

1. Equal Employment Opportunity Affirmative Action Plan Statement of Policy.
2. The Statement of Non-Compliance and Certificate of Non-Segregated Facilities.
3. The Contractor or Vendor Workforce Data Form listing all current employees, by classification, directly employed by the bidder. All categories of information requested must be supplied.
Note: The number of employees must be entered under each category (no check marks)

Below are the Federal definitions of the following racial groups accepted as minorities by the City of Rockford:

Black: A person having origins in any of the Black racial groups of Africa, not of Hispanic origin.

Hispanic: A person of Spanish or Portuguese culture with origins in Mexico, South or Central America, or the Caribbean Islands, regardless of race.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes for example, China, Japan, Korea, the Philippine Republic and Samoa.

American Indian or Alaskan Native: A person having origins in any of the original peoples of North America.

4. Your State of Illinois Pre-Qualification Certification Number, issued by the Illinois Department of Human Rights for the Illinois Department of Human Rights Act, must provide expiration date entered in the place provided therefore.
5. Certificate of Non-Barred Bidding
6. All executed Subcontractor/Leased Operator and Supplier forms.

If you have not obtained your State of Illinois Pre-Qualification Number (item #4), by signing these documents you agree to make application for this number within 30 days from the date of bid opening.

ANY BID WHICH FAILS TO INCLUDE THE CITY OF ROCKFORD EEO PAGES 2, 4, AND 5, COMPLETED AND SIGNED WITH YOUR SEALED BID WILL NOT BE READ AND WILL NOT BE CONSIDERED – NO EXCEPTIONS.

Falsification of any required Equal Employment Opportunity or Affirmative Action information on the part of the bidder could result in rejection of the bid submitted or in the case where a contract has already been awarded, in the cancellation of said contract.

Any questions pertaining to E.E.O. requirements should be addressed to Ron Moore, Diversity Procurement Officer, Legal Department, 425 East State Street, Rockford, Illinois 61104, Phone: (815) 987-5622 or ron.moore@rockfordil.gov

EQUAL EMPLOYMENT OPPORTUNITY
AFFIRMATIVE ACTION PLAN
STATEMENT OF POLICY

It is the policy of this company, _____
to provide equal employment opportunity without regard to race, religion, color, national origin, handicap, age or sex through a program of positive action affecting all employees. In this program, our company carries out the requirements of Federal Executive orders 11246 and 11375, Civil Rights Act of 1964, Equal Employment Act of 1972, and all other applicable laws, and indicates its active support of the principle of equal opportunity in employment.

At present, _____ % of our work force are minorities and _____ % of our work force are females, and we will attempt to utilize minorities and females through a positive, continuing program in all jobs for which we contract in the future. Our company will utilize referrals from the City of Rockford's Diversity Procurement Officer for use of minorities and females regarding any future job vacancies.

It is also our intent to make efforts to purchase supplies or equipment from small business concerns located in the City of Rockford or counties of Winnebago or Boone and owned in substantial part (at least 51 per cent) by minorities or females.

_____ is the official who will be responsible for implementing this policy statement.

_____ will be designated as the Equal Opportunity Officer in our company, responsible for submission of all required equal employment opportunity documents.

In addition, _____ is hereby authorized to sign payroll as well as this company's officers. (NOTE: If only officers will be authorized to sign payrolls, please fill in "No One" in this space.)

STATEMENT OF NONCOMPLIANCE

If the equal employment opportunity hearing committee determines that a contractor, subcontractor/leased operator of equipment or bidder is not in compliance with this chapter, (also known as Chapter 11, Article III the City of Rockford Equal Opportunity Employment Ordinance), the hearing committee shall issue and serve upon such person a written statement of noncompliance setting forth the manner in which it finds such person has violated this chapter, and imposing and/or requiring appropriate sanctions, including, but not limited to any and/or all of the following:

- a. Denying, suspending or revoking qualifications, or declaring the contractor or subcontractor irresponsible and ineligible for future contracts or subcontracts until such time as the contractor or subcontractor shall demonstrate to the equal employment opportunity hearing committee that it is in compliance;
- b. Withholding or delaying payment on the contractor or;
- c. Suspending, avoiding or canceling contract work.

CERTIFICATION OF NON-SEGREGATED FACILITIES

The bidder certifies that he/she does not maintain or provide for his/her employees any segregated facilities at any of his/her establishments, and that he/she does not permit his/her employees to perform their services at any location, under his/her control, where segregated facilities are maintained. The bidder agrees that a breach of this certification will be a violation of the Equal Opportunity clause in any contract resulting from acceptance of this bid.

The bidder agrees that (except where he/she has obtained identical certification from proposed subcontractors/leased operators of equipment for specific time periods) he/she will obtain identical certification from proposed subcontractors/leased operators of equipment from the provisions of the Equal Opportunity clause, and that he/she will retain such certification in his/her files.

CERTIFICATE OF NON-BARRED BIDDING

The undersigned certifies that it is not barred from bidding on this contract as a result of a conviction for the violation of State laws prohibiting bid rigging or bid rotating. The undersigned also certifies that current or prospective employees, contractors, and subcontractors/leased operators of equipment are not listed as Excluded Individuals/Entities with the US Government, as maintained by the US General Services Administration.

By signing below, the firm agrees that all information provided in the previous pages is accurate, and that if the firm below does not currently have a Department of Human Rights number they will apply for one within thirty days with the State of Illinois.

[Redacted Signature Area]

Authorized Signature

[Redacted Title Area]

Title

[Redacted Firm Name Area]

Firm

Our firm is a:

Minority Business Enterprise _____

Women Business Enterprise _____

Neither _____

City-Certified? Yes _____ No _____

City Certified? Yes _____ No _____

(Revised 12/21/09)

**City of Rockford
Request for Information**

**Comprehensive Health and Wellness Plan
On Site/Near Site Health Center with Application to Wellness, Occupational Health,
Technology Solutions, Education and Coaching, Disease and Condition Management**

Goal of this RFI

Gather information and assess the ability of respondents to assist the City of Rockford in accomplishing its mission. It is intended through this RFI process to select a firm as a finalist and with whom we will continue moving forward.

Services to be considered are prioritized as follows:

1. Primary Care
2. Wellness— Programs, Resources, Integration with City's goals
3. Technology Capabilities
4. Occupational Health / Disability and Workers Compensation
5. Pre-employment physicals, testing
6. Overall Creativity and Solutions

Implementation Date and Term

The City of Rockford is requesting information based on a clinic launch date of January 1, 2013. The initial term is for three (3) years.

Mission and Background

Create a Healthy Rockford— Employer, Community, and Economy.

To that end, the City of Rockford is seeking a partner or partners to:

- improve the health and wellness of our employees and families
- aid the City in leading both our citizens and providers in health and wellness
- defend and stimulate development in our health care economy

We intend to create a clinic that will serve as a hub of health promotion, coaching, lifestyle education, disease and condition management, as well as ensure our members continued access to high quality primary care services now and in the face of health care reform. We would also like this health center to reduce costs for disability and occupational health. It is not our initial goal to immediately create an acute care- urgent care-walk in clinic.

The City primarily uses a three pronged approach to its health benefits program including consumer driven and value based design, wellness, and aggressive disease management.

The City is a collectively bargained employer with 78% of the group members of police – PB&PA Unit 6, fire – IAFF Local 413, and labor – AFSCME Local 1058.

With its labor groups, the City implemented a wellness program called COR Wellness. The program is advised by an active employee committee made up of members from across the organization. The employees' pay check contribution for health insurance is indexed to their participation in the wellness

plan. Currently the wellness plan includes a specific "Path To Wellness" whereby employees must choose certain activities from three categories of education, fitness, and prevention.

Group A – 3 points each	Group B – 2 points each	Group C – 1 point each
<ul style="list-style-type: none"> • Attending Wellness Fair (F) July 22, 2011 • Health Risk Assessment-VIP • Screenings: Glucose, cholesterol, blood pressure-VIP (see below)Ⓞ • Diabetes Education Program* • Others TBD** 	<ul style="list-style-type: none"> • Smoking Cessation Program (F) with BCBS • Flu Shots (F) at City sites or sponsored locations • Wellness/Educational Classes (F) offered onsite throughout the year • Other activities TBD** 	<ul style="list-style-type: none"> • City Endorsed Fitness Events (F) Walks/ Runs • Proof of Health Club Participation for 1 month (may count up to 3 months) • Other activities TBD**

It is our desire that the Clinic/Health Center will aid the City in establishing patient compliance with prevention goals as well as condition and disease management as a primary measure.

The City also uses an intense disease management program designed to bring multiple disciplines including medical, social work, and psychology, in order to positively affect outcomes for specific plan members with multiple co-morbidities, high current claims, high predicted claims, non-compliance issues, etc.

Overall, the City of Rockford maintains a comprehensive benefits program including a PPO and HSA for medical as well as dental, Rx, life, and voluntary plans.

Plan Membership	
Relationship	Medical Members
Employee	1,167
Spouse	708
Dependent	1,231
Summary	3,106

The self-funded medical spend last year was approximately \$13 million. The City maintains an internal service fund for health insurance which was \$3 million in deficit a few years ago but is currently \$6 million in surplus. The fund is primarily used for reserves and to stabilize employee contributions.

COR Wellness Prevention Encounters			
Reporting Period	May 2011 - Apr 2012		
ACA Preventive Category	Claimants	Services	Paid
IMMUNIZATIONS	618	3,062	\$145,376
ROUTINE PHYSICAL	933	992	\$150,833
WELL BABY EXAM	346	598	\$79,730
ROUTINE LAB	626	2,136	\$36,863
ROUTINE COLONOSCOPY	34	36	\$26,472
ROUTINE MAMMOGRAM	294	668	\$27,042
ROUTINE PAP SMEAR	360	397	\$13,064
HEALTH EDUCATION & COUNSELING SERVICES	7	46	\$7,748
ROUTINE PROSTATE TEST	149	164	\$4,630
ROUTINE COLORECTAL CANCER SCREENING	55	60	\$1,005
ROUTINE BONE DENSITY TEST	6	6	\$427
SMOKING CESSATION	6	6	\$93
Summary	1,644	8,171	\$493,282

Expenses by Service Category		
Reporting Period	Jun '11-May '12	
Service Category	Paid	Paid %
Inpatient Facility	\$4,049,158	30.0%
Outpatient Facility	\$4,009,629	29.7%
Professional	\$5,424,322	40.1%
Summary	\$13,483,110	

Claimants in this chart are not unique with some claimants in multiple categories. For example, of the 618 immunizations, 252 also had a well baby exam.

City of Rockford Medical Enrollment by Age Band, Gender, Dependent, Employee					
Age/Gender Band	Medical Members	Medical Employees	Age/Gender Band	Medical Members	Medical Employees
<1 F	19	0	40-44 F	165	43
<1 M	24	0	40-44 M	184	162
1-4 F	75	0	45-49 F	123	49
1-4 M	73	0	45-49 M	112	92
5-9 F	95	0	50-54 F	107	50
5-9 M	141	0	50-54 M	108	91
10-14 F	138	0	55-59 F	121	62
10-14 M	158	0	55-59 M	105	84
15-19 F	140	0	60-64 F	78	42
15-19 M	144	0	60-64 M	104	87
20-24 F	109	4	65-69 F	24	14
20-24 M	116	10	65-69 M	32	28
25-29 F	67	9	70-74 F	5	3
25-29 M	76	61	70-74 M	5	4
30-34 F	96	21	75+ F	15	13
30-34 M	91	85	75+ M	13	12
35-39 F	123	36	Summary	3,106	1,167
35-39 M	120	105			

Your response to this RFI and Evaluation

- Please provide at least **ONE (1) ORIGINAL** and **FOUR (4) COPIES** of your response.
- Please provide **ONE (1) digital copy** either by flash drive or cd with your response.

If you have questions during the RFI process, please contact: Xavier Whitford, Financial Analyst, Xavier.whitford@rockfordil.gov, 815.967.6938

Remember, the City is primarily looking for creative partners with whom to build a sustainable Healthy Rockford.

The evaluation will be undertaken by the City's team including the Director of HR, Associate Director of HR, City Administrator, Mayor, Financial Analyst, and the City's retained employee benefits consultant.

- Provide a cover letter that summarizes your company, philosophy, basic model, and any of your products that will aid us in accomplishing our mission.
- Provide recommendations as you see fit.
- Show your understanding of our mission and your capabilities, including:
 - Creativity
 - Experience of your management team and their commitment to the City of Rockford
 - Technology resources and ability to interface with other partners, send and accept data feeds, utilize electronic medical records, deploy web and smartphone based tools and applications
 - Willingness and the extent to which you are able to partner with the City of Rockford in beta testing, deploying pilot programs, participate in research, etc.

Questions

1. Company Information
2. Clinic
3. Primary Care Services
4. Wellness, Disease/Condition Management and Occ Health Capabilities
5. Technology
6. Staffing
7. Implementation
8. Reporting, Measurement, and ROI
9. Cost
10. References

1: COMPANY INFORMATION

1.1 Name and contact information for this proposal.

1.2 Please provide contact information for the individual who would serve as the main point of contact for the City of Rockford.

1.3 Company Information

a. Full Name of Company, corporate headquarters and year of formation:

b. Brief description of company history and current ownership arrangement:

c. How many employees are devoted to administration of your clinic business, medical services and wellness services?

1.4 Do you currently operate work site medical clinics? Yes No

a. How many?

b. Average size employer, smallest, largest, most desirable size for you?

c. States clinics are in?

1.5 Do you have experience providing worksite medical clinics for municipalities, other units of government? Yes No

1.6 What key attributes distinguish you from your competition?

2: CLINIC

2.1. Explain your philosophical approach to onsite clinics (corporate mission and vision).

2.2. What is your clinic staffing strategy and the skill level?

2.3. Do you own, lease, or contract the medical staff?

2.4. Is the clinic staff hired and paid by the City of Rockford = IN HOUSE, medical services contracted by the City of Rockford with your firm managing operations = HYBRID, or the entire enterprise is outsourced to your firm = OUTSOURCED? In House Hybrid Outsourced

2.5. How will participants schedule appointments with the clinic—Online? Telephone?

- 2.6. What is the typical amount of face to face time a participant will have with a clinician at an appointment? Does this vary by level of clinician – MD, PA, NP, etc.?
- 2.7. Do you generally see the clinic open for walk-in, by appointment or both?
 Walk-In By Appointment Both
- 2.8. Do you capture CPT and ICD codes? Yes No
- 2.9. Please describe your HIPAA compliance and confidentiality measures:
- 2.10. How do you handle referrals for imaging, to specialists, other providers?
- 2.11. Describe your performance standards and measures for the clinic such as internal audit, quality assurance programs, wait times, employee inquiries, etc.
- 2.12. How will you interface with the City of Rockford Human Resources department? What should be the HR role in the clinic operations, overall, day to day?
- 2.13. Describe liability and malpractice issues: What level of liability and malpractice insurance coverage will you carry to protect the clinic and the City of Rockford?
- 2.14. The City has been in discussion with and leading a study of wellness and onsite clinic collaboration between the County of Winnebago and the Rockford Public School system. Are your systems capable of tracking patients from different employers and reporting out to those different employers? Yes No

3: PRIMARY CARE SERVICE CAPABILITIES

- 3.1. Please describe your ability to render onsite primary care needs along with your philosophy on workplace healthcare:
- 3.2. Please provide a general listing of the health conditions to be cared for in your clinic setting:
- 3.3. Please provide a general listing of the wellness examinations/evaluations which may be rendered in the clinic including a Men's Health Evaluation, Women's Health Evaluation, general wellness screenings:
- 3.4. Please list the lab services that you will provide. What lab provider will you use?
- 3.5. Please provide a general listing of the vaccinations which may be rendered in the clinic:
- 3.6. How will you select medications to be dispensed onsite?

3.7. Can you use the Pharmacy Benefit Manager the City currently uses to purchase Rx? If not, whom do you use? Yes No

3.8. Are there any primary care services that you will not provide in the clinic?

4: WELLNESS, DISEASE MANAGEMENT, OCCUPATIONAL AND DISABILITY

4.1. Do you offer a Health Risk Assessment (HRA) Yes No

a. Is your HRA: proprietary/wholly-owned licensed outsourced

b. In what format is your HRA offered? Online (web access) Paper Both

c. Can you import biometric screening data obtained in the clinic or elsewhere into your HRA? Yes No

d. Can you integrate HRA data from a prior vendor? Yes No.

e. Will you provide an aggregate report to the City of Rockford? Yes No

f. Can the aggregate data be broken out by employee group as long as there are more than 50 employees per group? Yes No

4.2. The City employees contribute out of their paycheck for their health insurance based on their participation in the wellness program. Assuming all HIPAA related permissions and authorizations are obtained, are your systems able to track and report to HR the names employees, for example, who have had a physical, screening, or other established wellness goal such as biometric related goals? Yes No

Do you do this now for any of your clients? If yes, please describe. Yes No

4.3. Regarding your health coaching and education services:

a. Check the type of health coaching you will provide:

Face to face Online Telephone

b. Please describe your coaching methodology/philosophy/techniques:

c. Who will provide health coaching?

d. Will you perform health coaching outreach and engagement? Yes No
If yes how do you identify participants and conduct outreach?

e. Please provide a general listing of the health coaching programs you offer, e.g. smoking cessation, stress, weight loss, etc.

4.4. Do you have a system for reminding participants when their yearly and age appropriate screenings are due? Yes No

4.5. Regarding your disease management services:

a. How are your disease management services provided?

Onsite in the clinic Online Via telephone

b. Please describe your disease management methodology/philosophy/techniques:

c. Will you perform disease management outreach and engagement? Yes No
If yes how do you identify participants and conduct outreach?

d. Please provide a general listing of the conditions that are included in you disease management programming:

e. The City has used in the past and is interested in continuing to use an integrated approach to chronic disease management. Do you now and can you assist the City in identifying and treating those members who are most at risk, with co-morbidities, who are high utilizing and will benefit from an intensive and multidisciplinary team approach? Please describe.

4.6. Regarding Occupational Health, do you operate any clinics primarily for this purpose? Yes No

4.7. What is the evolution of most of your clinics; begin as OCC Health and expand to Primary Care or the other way around?

4.8. Do you have a system to track and report to the City of Rockford when an encounter is related to Workers' Compensation? Yes No

4.9. Do you have a system for evaluation, documentation, and management of worksite injuries? Yes No

- 4.10. Can pre-employment physicals including drug testing be performed in the clinic? Yes No
- 4.11. Can disability related medical exams be performed in the clinic? Yes No
- 4.12. Do you have any Return-to-Work programs? Yes No

5: TECHNOLOGY

5.1. Does your technology solution include:

- a. Online personal medical records for participants? Yes No
If yes, please describe:

If yes, will HRA and Biometric data be integrated? Yes No

- b. Electronic Medical Records for Clinicians Yes No

Name of System:

If yes, will HRA and biomedical data be integrated? Yes No

- c. Web-based consumer education portals? Yes No

d. To what technology will HR and City management have access?

e. What technology will members be able to use?

- f. Do you have an application(s) solution for iOS, Android, smartphone Yes No

5.2. Will you offer e-prescribing? Yes No

5.3. What practices do you have in place to protect the confidentiality of individual information when electronically storing or transferring information? What type of back-up practices do you use?

5.4. If possible, please provide a URL and password or a CD/DVD for a demo of any technology solutions offered:

5.5. Do you use predicative modeling or tool(s) to find gaps in patient compliance? Yes No
If yes, can you provide a sample report?

6: Management Teams and Staffing

- 6.1. Regarding your Account Management Team (for each, please list name, city/state, years of experience, years with your organization):
- Who will be the account manager?
 - Who will be the day-to-day contact?
 - Who will provide customer service to the patients?
- 6.2. Please describe the implementation process, account management and will the implementation team be different from the day-to-day account team?
- 6.3. Please describe the staffing model you are proposing for the clinic (number/type of clinicians and other staff):
- 6.4. If you are not proposing to staff clinic with a Physician:
- Who will serve as the Medical Director for the clinic?
 - Where will the medical director be located?
 - Describe how the medical director will provide oversight to clinic operations:
- 6.5. Please discuss the recruiting, selection, credentialing, and retention process for your clinic staff:
- 6.6. Can the City participate with you and or contribute to the recruiting, hiring, staffing process?
 Yes No
- 6.7. Will the City have an opportunity to provide input during the clinic staff selection process?
 Yes No If yes, please describe:
- 6.8. How many hours per week are you proposing the clinic operate?
- 6.9. How are you going to communicate with the local community healthcare providers?
- 6.10. Can you refer patients to any network, hospital, provider?
 Yes No
- 6.11. Do you offer a provider network, for example, services for specialty, imaging, laboratory, etc.?

7: IMPLEMENTATION

- 7.1. Please define the physical space and logistical requirements for the onsite clinic build-out.
- 7.2. Please provide a sample implementation and launch plan that represents a January 1, 2013 launch. What is the desired time line?
- 7.3. Do you assist in the communication to employees of the clinic? Yes No

8: PROGRAM REPORTING, MEASUREMENT, AND EVALUATION

- 8.1. What types of reports will you provide the City of Rockford? Do you have a standard reporting package? Provide samples if possible such as: Utilization reports, Coaching and Disease Management, Aggregate Reports including overall conditions, patient compliance, Rx's Dispensed, etc.
- 8.2. What is the report frequency and will the City of Rockford be able to generate reports independently?

9: COST AND PREDICTED ROI

1. Please provide as detailed a quote as possible including estimated costs of build out, staff costs, management fees, as well as add-on costs for coaching, nurse-line, technology, etc.
2. What is your fee model, such as cost plus, flat fee, other.
3. Please identify and estimate any pass through costs such as equipment, supplies, Rx, etc.
4. Please estimate potential savings.
5. How is the cost of build-out handled? Is this included in your fee, amortized, etc.?
6. Do you require a deposit, initial payment, or do you begin billing upon clinic launch?
7. What is the ROI of your clients similar to the City of Rockford such as direct savings compared to off-site primary care, re-directed care from ER and specialists, downstream utilization reduction through wellness and early intervention, and estimated savings from lost time and productivity?

10: REFERENCES

Please provide reference(s) including the Organization's Name, Contact Name, Contact Phone, Contact Email, and Contact's Role.

Also, please provide any case studies that will help the city in understanding your product, philosophy, and the general effect of an onsite or near site clinic, particularly in the municipal environment if possible.

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End Questions