



REQUEST FOR PROPOSAL

Clinical Laboratory and Phlebotomy Services

REQUEST FOR PROPOSAL DATE: February 1, 2024

PROPOSALS DUE: 2:00 EDT – March 1, 2024

RFP # 2024 – 2

1. INTRODUCTION

Thunder Bay Community Health Service, Inc. (TBCHS) invites and will accept proposals for clinical laboratory testing and phlebotomy services. Vendors should submit detailed proposals in response to this solicitation, including any alternatives the vendor feels would enhance the services provided. TBCHS is seeking a single laboratory services vendor to perform tests in-house and at its referenced locations.

2. OBJECTIVE

Our intent is to solicit responses from known vendors, identify qualified vendors, and to establish a contractual relationship with one vendor which best meets the needs of TBCHS by providing the highest quality service level at the most economical cost.

3. BACKGROUND

Thunder Bay Community Health Service, Inc. is a Federally Qualified Health Center (FQHC) funded with 18% federal funds from the Department of Health and Human Services Administration, and 82% non-federal sources.

The project contained in this RFP uses 100% federal and 0% non-federal resources. Thunder Bay Community Health Service, Inc. qualifies for GSA pricing and is tax-exempt, #38-2290337.

Mission Statement

"Caring for the People of our Communities"

4. **General Information:**

RFP Schedule:

RFP issued: 2:00 EDT February 1, 2024

Questions Due: February 15, 2024

Questions responded to (no later than): February 22, 2024

Proposals Due by 2:00pm EDT: March 1, 2024

Rating and Selection: March 15, 2024, or before

RFP Submittal: Proposals are to be submitted in sealed envelopes, or by e-mailed zip file clearly identified with the RFP number and title, with all attachments, no later than 2:00pm local time on March 1, 2024

Thunder Bay Community Health Service, Inc.

Attn: Kayla Berry
Chief Operating Officer
100 N Ripley St. Suite E
Alpena, MI 49707

Proposals must be valid for acceptance for 60 days.

Each complete submission is to include a signed original with all required attachments; three complete copies; (if mailed). A digital version can be sent using a zip file emailed to kberry@tbchs.org by the deadline for submission. All proposals are to be created using a recent version of Microsoft Office Word and/or .pdf file. Proposals delivered after the above required date and time will be received but will not be considered and will be rejected for lateness.

All proposals submitted will become property of TBCHS.

TBCHS reserves the right to reject any and all proposals.

Points of Contact: Questions and requests for clarification regarding of this RFP must be addressed via US mail or email received by 2:00 EDT, February 15, 2024:

Thunder Bay Community Health Service, Inc.
Attn: Kayla Berry
Chief Operating Officer
100 N Ripley St. Suite E
Alpena, MI 49707
Email: kberry@tbchs.org

Questions and requests for clarifications may be sent via email, provided that the RFP number, Title and the words "question" and/or "clarification" are identified in the subject area of the email. Questions and requests without this subject identification may be considered routine emails and may not get properly addressed.

All questions and requests for clarification will be responded to on TBCHS' website www.tbchs.org (click on request for bids) to all respondents by July 29, 2022. Any responses by the TBCHS that are considered to be a change in the terms, conditions, and specifications of this RFP will be posted on the website as an addendum. No communications of any kind may be considered a change in terms, conditions, and specifications in this RFP unless posted as an official addendum on the website.

Communication from any other source, other than above, should be considered as invalid with regard to this RFP.

5. General Terms & Conditions:

- A. Interested Parties:** All interested vendors are invited to submit a proposal in accordance with the terms, conditions, and specifications contained herein.
- B. Tax Exemption:** TBCHS as a 501(c)3 IRS and Michigan Non-Profit Health Organization entity, is exempt from sales and use of taxes. Bidders shall inform all prospective subcontractors and suppliers from whom they expect to obtain services or supplies of the tax-exempt status of TBCHS. Following the contract award, an exemption certificate will be furnished by TBCHS if the vendor requests.
- C. Expenses:** TBCHS assumes no liability for payment of expenses incurred by proposers in the preparation and submission of proposals in response to this invitation.
- D. Non-Discrimination:** The vendor agrees not to refuse to hire, discharge, promote, or demote, or to discriminate in matters of compensation against any person otherwise qualified, solely because of race, color, religion, national origin, gender, age, military status, sexual orientation, marital status, or physical disability.
- E. Governing Law:** The laws of the State of Michigan shall govern any contact executed between the successful proposer and TBCHS. Further, the place of performance and transaction of business shall be deemed to be in the County of Montmorency, State of Michigan and in the event the litigation, the exclusive venue and place of jurisdiction shall be Montmorency County in the State of Michigan.
- F. Termination of Contract:** TBCHS may, by written notice to the successful vendor, terminate the contract if the vendor has failed to perform its service in a manner satisfactory to TBCHS, per specifications defined in the contract and/or RFP. The date of termination shall be stated in the notice. TBCHS may cancel the contract upon thirty days written notice for any reason other than cause. This may include, but is not limited to, TBCHS' inability to continue with the contract due to the elimination or reduction in funding.
- G. Qualifications of the Individuals Who Will Work on the Project:** The qualifications must identify the project manager and explain how this point of contact will lead the consultant's efforts. If interviews are necessary for selection, it will be necessary for the proposed project manager to conduct a majority of the presentation and be able to answer most questions asked during the interview process. All other relevant personnel who will work on the project should be identified in this section with relevant specific experience identified. Include specific work assignments of the proposed personnel. Resumes describing the education and work experiences of the key people proposed for this assignment should be included.
- H. Confidentiality of Information:** The vendor acknowledges that the vendor will, or may, be making use of, acquiring or adding to information about certain matters and things which are confidential to TBCHS and which information is the exclusive property of TBCHS, including, but not limited to: Internal personnel and financial

information, vendor names and other vendor information (including vendor characteristics, services and agreements), purchasing and internal cost information, internal services and operational manuals, and the manner and methods of conducting TBCHS' business. Because the vendor will have access to patient information, a business associated agreement will need to be executed and signed with the contract.

6. Proposal Preparation:

- A. Exceptions and Deviations:** Any exceptions to or deviations from these Terms & Conditions must be identified, in writing, on an attachment to the proposal submission. TBCHS reserves the right to accept or reject, at its sole discretion, any exceptions, or deviations by the proposer.
- B. Substantive Proposals:** By submitting a proposal, the proposer guarantees that (1) its proposal is genuine and is not made in the interest of, or on behalf of, any undisclosed person, firm, or corporation; (2) it has not directly or indirectly induced or solicited any other respondent to put in a false or sham bid, (3) it has not solicited or induced any other person, firm, or corporation from proposing; and (d) it has not sought by collusion to obtain for itself any advantage over any other proposer or over TBCHS.
- C. Minimum Qualifications:** To be considered for selection, vendors must meet at least the following minimum qualifications.
 - i. Established Business.** Vendor must have been engaged as a place of business 5 years prior to the release of this RFP.
 - ii. Customer Satisfaction, Financial Resources and Ability to Perform.** Vendor must be able to show proof that they have an established satisfactory record and have sufficient financial support, equipment, and organization to ensure that they can satisfactorily execute the services to be performed per this RFP.
 - iii. Legal Compliance.** Vendor must be in compliance with all applicable laws, rules, regulations, and ordinances of the State of Michigan and the United States.
 - iv. Insurance:** The vendor shall not commence work until it has procured, maintains, and provides proof of the policies of insurances and liabilities listed below. The vendor will not be relieved of any liability, claims, or other obligations in conjunction with the signed agreement with TBCHS by reason of its failure to procure or maintain the necessary insurance and liabilities. Failure on the part of the vendor to obtain such insurance and liabilities prior to, and during the term of the contract, will constitute a breach of contract in which TBCHS has the right and may immediately terminate the signed agreement. TBCHS reserves the right to request and receive a copy of any policy related to services provided to TBCHS.

- (a) *Commercial General Liability*: The vendor shall secure and maintain, during the term of agreed contract and for such additional time for service being performed, Commercial General Liability Insurance issued to and covering the liability of the vendor with respect to all work performed by vendor and its third-party vendors under the contract, to be written on a comprehensive policy form. This insurance shall be written in amounts not less than \$1 million for each occurrence and aggregate for personal injury including death and bodily injury and \$1 million for each occurrence and aggregate for property damage. This policy of insurance shall name Thunder Bay Community Health Service, Inc, its agents, officers, and employees as additional insured. This policy shall have all necessary endorsements to provide coverage without exclusion for explosion and collapse hazards, underground property damage hazard, blanket contractual coverage's, as well as Owners' and vendors' Protective Liability (OCP) coverage. The policy shall also provide coverage for contractual liability assumed by vendor under the provisions of the contract and "Completed Operations and Projects Liability" coverage.
- (b) *Workers Compensation Insurance*: The vendor shall procure and maintain Workers Compensation Insurance, fully complying with the provisions of the Worker's Compensation Act of the State of Michigan, during the period of this contract and for such additional time as work on this project is being performed.

Submission Information and Documents: The following information and documents shall be included in the proposal submission:

- (1) Name of company, address, telephone number, facsimile number, email address, website URL, and contact person's name.
 - (2) Vendor awarded the contract must submit a completed and signed IRS Form W-9 to TBCHS before contract begins.
7. **Signatures:** The proposal must be submitted in ink, signed by an officer or person qualified to bind the proposing company.
8. **Withdrawal of Proposal:** A Proposer may withdraw its own proposal at any time prior to the proposal due date and time as identified herein. After that date and time, no proposer may withdraw its proposal for any reason. All proposals shall be valid for a period not less than 60 calendar days after the proposal due date.

9. **Selection:**

A. Vendor Selection: No proposal will be considered unless it is complete. All proposals submitted will be first screened to determine minimum vendor qualifications as outlined in this RFP. The proposals will be ranked, based on total cost and the ability of the proposing vendor to provide the required services effectively. Proposals that do not meet these minimum requirements will automatically be rejected and shall not undergo further evaluation.

B. Right of Acceptance and Rejection: TBCHS reserves the right to accept or reject any or all proposals and to waive any formalities, informalities, and deviations, which, in its opinion, best serve the interests of TBCHS. TBCHS is not bound to accept the lowest priced proposal but will select the proposal that represents the best value for TBCHS.

C. Negotiation: Subsequent to the Proposal due date, TBCHS reserves the right to negotiate terms and conditions with proposers. TBCHS reserves the right to negotiate modifications to a proposal with a single proposer without obligation to negotiate similar modifications with other proposers.

10. **Key Personnel:** TBCHS prefers a single account relationship manager. In the vendor's proposal, list names, titles and locations of the primary and backup employees who will be assigned to TBCHS' account. Also include certifications, education, experience, and qualifications of personnel. The vendor must establish one person to serve as project manager and liaison to the TBCHS project manager. TBCHS looks to the vendor to inform the needs of the project, maintain and cohesive schedule, and coordinate, oversee and manage work produced. Therefore, the vendor must establish a work schedule for all parties to ensure timely completion of the project. In addition to the start and completion of various assessment stages, the schedule shall also show percentages of work to be completed at any given time, as well as significant dates that will serve as check points to determine compliance with approved schedule.

QUALIFICATIONS OF THE INDIVIDUALS WHO WILL WORK ON THE PROJECT:

The qualifications must identify the project manager and explain how this point of contact will lead the consultant's efforts. If interviews are necessary for selection, it will be necessary for the proposed project manager to conduct a majority of the presentation and be able to answer most questions asked during the interview process. All other relevant personnel who will work on the project should be identified in this section with relevant specific experience identified. Include specific work assignments of the proposed personnel. Resumes describing the educational and work experiences of the key people proposed for this assignment should be included.

11. **Competitive Position:** Describe what differentiates the vendor's service from the other competitors. Include in the discussion how the vendor keeps abreast of current and future trends. Discuss the vendor's approach to communication.

12. **Customer References:** Provide references from at least three (3) customers to which the vendor has provided the services required under this RFP. These should be recent customers with needs comparable to those of TBCHS. Select a mix of long-standing and new customers. Health care reference are preferred. FQHC references within the State of Michigan would be ideal. References should include a contact name and phone number and e-mail address for reference.
13. **Scope of Work:** Thunder Bay Community Health Service, Inc. is seeking a qualified partner to provide laboratory services. Our clinics and providers use a wide variety of laboratory services. For this reason, services must be a comprehensive scope and processed in a timely manner. Please refer to addendum 1, for a listing of the most frequently ordered laboratory services.
14. **COST PROPOSAL:** The submittal shall include “PROJECT FEE” containing the estimated hours by task and a not to exceed lump sum fee. If filed by email, put the fee schedule in a separate file named “Project Fee.” If additional or alternative efforts are recommended these should be broken out separately from the primary tasks.
15. Required contract specifics:
- a. Requirement 1 Coverage for our Hours of Operations and collaborative team members**
- a. Ensure daily pick up of samples Monday – Friday
 - b. Onsite phlebotomy Mon-Fri 7am – 5:00 PM
 - c. Phlebotomist onsite for all clinic hours
 - d. Well trained staff – collaborative with onsite care team (able to answer questions such as what tubes to use for specific draws, qualified and able to obtain difficult draws, including peds blood draws, etc.)
 - e. Proposals should also indicate the vendor’s plans to staff the onsite lab when its staff take planned and unplanned leave
 - f. Communication on coverage will align with TBCHS operational plans.
 - g. Reliability of on-site coverage for lab draws and showing up for shift.
 - h. Proposal must include the vendors operation procedures to determine license/registration or required certifications as applicable and appropriate for services provided, verification of education, training, and fitness for duty, along with health clearance, annual competencies, training, professional attire, hygiene, behaviors, and communication requirements.
- b. Requirement 2 Coverage for STAT labs and other point of care testing**
- a. STAT labs: can help us prevent unnecessary ER utilization.
 - b. POC testing for certain labs, potential opportunity- looking for willingness to collaborate. CBC, CMP

- c. Able to perform stool and blood culture labs.
- d. Ability to perform urine drug screening.
- c. Requirement 3 Quality Assurance**
 - a. Result peer review, quality assurance testing provided on specific cadence.
 - b. Response time on mutually agreed upon for disputes of lab values.
 - c. Shared principals on patient experience and quality of care
 - d. Collaboration on shared spaces and etiquette with supplies needed to care for patients.
 - e. Ability to make hiring decisions, conversation related to excellence.
- d. Requirement 4 Communication, Orders, Reporting Results and EHR Interface**
 - a. Ease in finding labs that are part of the compendium that our providers use routinely.
 - b. interface with TBCHS EMR System for ordering and results, vendor willingness to work with TBCHS.
 - c. Turnaround time matrix provider by lab provider
 - d. Collaboration such as in situations where staff need education on approved diagnosis codes for specific labs. *Example, HIV and hep c screenings; some insurances will not cover and clinical staff find it difficult to know what DX codes to use to remain compliant.*
- e. Requirement 5 Insurance and Patient Billing and Discounted Care / Client Billing**
 - a. In network with all major insurances within the state of Michigan insurances including healthy mi Medicaid plans, participate with sliding fee program.
 - b. Low-cost, high-quality provider for our shared patients
 - c. Provider details catalog of lab studies, and associated pricing
 - d. The proposal must include language that provides discounted care for patients that qualify for TBCHS Sliding Fee Program. As an FQHC, TBCHS is required to have a Discounted Program for uninsured patients and Sliding Fee Program for patients that meet the federal poverty guidelines. Vendors performing work on behalf of TBCHS must provide Slide Fee Program policies. The proposal must detail how the vendor will respond and resolve issues with bills to TBCHS patients. This should include the qualifications of the account manager, the time to respond to billing inquiries and resolve billing problems, and escalation procedures when issues go unresolved.
- f. Requirement 6 – Lease Space**
 - a. The proposal must include proposed lease amount inclusive of utilities and onsite security services.

Most Commonly Ordered Labs Addendum 1

Description

COMPREHENSIVE METABOLIC PANEL W/EGFR
 CBC (INCLUDES DIFF/PLT)

LIPID PANEL

TSH, 3RD GENERATION

VITAMIN D, 25-HYDROXY, LC/MS/MS

MICROALBUMIN, RANDOM URINE (W/CREATININE)

T4, FREE

HEMOGLOBIN A1c

PAIN MANAGEMENT, PROFILE 6 WITH CONFIRMATION

TSH, 3RD GENERATION W/REFLEX TO FT4

CULTURE, THROAT

CBC (H/H, RBC, INDICES, WBC, PLT)

VITAMIN B12/FOLATE, SERUM PANEL

URINALYSIS, COMPLETE W/REFLEX TO CULTURE

PSA, TOTAL

DRUG MONITOR, BUP, W/CONF,W/NALOXONE,URINE

CULTURE, URINE, ROUTINE

DRUG MONITOR, GABAPENTIN, QN, URINE

IRON, TIBC AND FERRITIN PANEL

BASIC METABOLIC PANEL W/EGFR

VITAMIN B12 (REFL)

DRUG MONITOR, FENTANYL, QN, URINE

DRUG MONITOR, PREGABALIN, QN, URINE

DRUG MONITOR, TRAMADOL, QN, URINE

URIC ACID

SED RATE BY MODIFIED WESTERGREN

HIV AB, HIV 1/HIV 2, EIA W/REFL TO HIV 1 WB

HEPATITIS C ANTIBODY

CHLAMYDIA/N. GONORRHOEAE RNA, TMA

MAGNESIUM

URINALYSIS, COMPLETE

C-REACTIVE PROTEIN

ThinPrep Imaging Pap and HPV mRNA E6/E7

HEPATIC FUNCTION PANEL

Pain Management Profile 6, INITIAL screening

TESTOSTERONE, FREE AND TOTAL, LC/MS/MS

ANACHOICE(R) SPECIFIC AB CASCADING REFLEX

DRUG MONITOR,METHYLPHENID METAB, QN, URINE

RHEUMATOID FACTOR

Locations of Care Addendum 2

*Indicates on-site phlebotomist required.

Hillman Clinic *	15774 State Street Hillman, MI 49746
Atlanta Clinic*	11899 M32 W Atlanta, MI 49709
Atlanta Community Schools	10500 County Road 489 Atlanta, MI 49709
Onaway Clinic*	21258 W. M68 Onaway, MI 49765
Rogers City Clinic*	205 S. Bradley Hwy Rogers City, MI 49779
Rogers City Elementary School	532 W. Erie Street Rogers City, MI 49779
Rogers City High School	1033 West Huron Ave. Rogers City, MI 49779
Fairview Clinic*	1910 E. Miller Rd. Fairview, MI 48621
Fairview Area Schools	1879 E. Miller Rd. Fairview, MI 48621
Cheboygan School-Based Health Center	905 W. Lincoln Ave. Cheboygan, MI 49721
Cheboygan Inverness Academy	7461 N. Straits Hwy Cheboygan, MI 49721
Cheboygan East Elementary School	440 Garfield Ave. Cheboygan, MI 49721
Cheboygan High School	801 W. Lincoln Ave Cheboygan, MI 49721
Mackinaw City Public Schools	609 West Central Ave. Mackinaw City, MI 49701
Onaway School-Based Health Center	4549 M33 Onaway, MI 49765
Inland Lakes School-Based Health Center	4363 S. Straits Hwy Indian River, MI 49749
Inland Lakes Elementary School	6800 W. Wilson Rd. Indian River, MI 49749
Wolverine Middle/High School	13131 Brook St. Wolverine, MI 49799
Wolverine Elementary School	5993 Sholes St. Wolverine, MI 49799

Vanderbilt Area School	947 Donovan Street Vanderbilt, MI 49795
Johannesburg Lewiston Area Schools	10854 M32 E. Johannesburg, MI 49751
Lewiston Elementary School	4580 Montmorency Street Lewiston, MI 49756
Mio School Wellness Center	1110 8 th Street Mio, MI 48647
Hale Area Schools	311 N. Washington Hale, MI 48739
Posen Consolidated Schools	10575 Michigan Ave. Posen, MI 49776