

State of Hawaii
Department of Health
Adult Mental Health Division
Hawaii State Hospital

Request for Proposals

HTH 430-12-001

Pharmacy Services

For Hawaii State Hospital

Date Issued
October 26, 2011

Date Due
November 23, 2011

Note: If this RFP was downloaded from the State Procurement Office RFP Website each applicant must provide contact information to the RFP contact person for this RFP to be notified of any changes. For your convenience, you may download the [RFP Interest form](#), complete and e-mail or mail to the RFP contact person. The State shall not be responsible for any missing addenda, attachments or other information regarding the RFP if a proposal is submitted from an incomplete RFP.

October 26, 2011

REQUEST FOR PROPOSALS

**PHARMACY SERVICES
RFP No. HTH 430-12-001**

The Department of Health, Adult Mental Health Division, Hawaii State Hospital Branch, is requesting proposals from qualified applicants to provide clinical pharmacy services for seriously mentally ill adults. The contract term will be from January 1, 2012 through December 31, 2012.

Proposals shall be mailed and postmarked by the United States Postal Service on or before November 23, 2011, or hand delivered no later than 2:00 p.m., Hawaii Standard Time (HST), on November 23, 2011, at the drop-off sites designated on the Proposal Mail-in and Delivery Information Sheet. Proposals postmarked or hand delivered after the submittal deadline shall be considered late and rejected. There are no exceptions to this requirement.

The Hawaii State Hospital will conduct an orientation on Thursday, November 3, 2011, from 9:30 a.m. to 12:00 noon HST, at Clinical Director's Conference Room, Building A, 45-710 Kea'ahala Road, Kaneohe, Hawaii. All prospective applicants are encouraged to attend the orientation.

The deadline for submission of written questions is 2:00 p.m., HST, on November 8, 2011. All written questions will receive a written response from the State on or about November 14, 2011.

Inquiries regarding this RFP should be directed to the RFP contact person, Ms. Enid Kagesa at telephone: (808) 586-8282, fax: (808) 586-4745.

PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

**THE NUMBER OF COPIES TO BE SUBMITTED:
THE 3 COPIES MUST INCLUDE ONE (1) SIGNED ORIGINAL AND ONE (1) SINGLE
SIDED, UNBOUND COPY.**

**ALL MAIL-INS SHALL BE POSTMARKED BY THE UNITED STATES POSTAL
SERVICE (USPS) NO LATER THAN
Wednesday, November 23, 2011
and received by the state purchasing agency no later than ten (10) days from the submittal
deadline.**

All Mail-ins

Department of Health
Adult Mental Health Division
P.O. Box 3378
Honolulu, Hawaii 96801-3378

RFP Contact Person

Ms. Enid Kagesa
For further info. or inquiries
Phone: (808)586-8282
Fax: (808) 586-4745

**ALL HAND DELIVERIES SHALL BE ACCEPTED AT THE FOLLOWING SITE UNTIL 2:00 P.M.,
Hawaii Standard Time (HST), Wednesday, November 23, 2011.**

Drop-off Site

Oahu:
Department of Health
Adult Mental Health Division
1250 Punchbowl Street, Room 256
Honolulu, Hawaii

BE ADVISED: All mail-ins postmarked by USPS after **November 23, 2011**, shall be rejected.

Deliveries by private mail services such as FEDEX shall be considered hand deliveries. Hand deliveries shall not be accepted if received after **2:00 p.m., HST, November 23, 2011.**

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Section 1

Administrative Overview

Section 1

Administrative Overview

Applicants are encouraged to read each section of the RFP thoroughly. While sections such as the administrative overview may appear similar among RFPs, state purchasing agencies may add additional information as applicable. It is the responsibility of the applicant to understand the requirements of *each* RFP.

I. Procurement Timetable

Note that the procurement timetable represents the State's best estimated schedule. Contract start dates may be subject to the issuance of a notice to proceed.

<u>Activity</u>	<u>Scheduled Date</u>
Public notice announcing Request for Proposals (RFP)	10/26/11
Distribution of RFP	10/26/11
RFP orientation session	11/03/11
Closing date for submission of written questions for written responses	11/08/11
State purchasing agency's response to applicants' written questions	11/14/11
Discussions with applicant prior to proposal submittal deadline (optional)	TBD
Proposal submittal deadline	11/23/11
Discussions with applicant after proposal submittal deadline (optional)	TBD
Final revised proposals (optional)	TBD
Proposal evaluation period	11/28/11 – 12/02/11
Provider selection	12/08/11
Notice of statement of findings and decision	12/08/11
Contract start date	1/01/12

II. Website Reference

The State Procurement Office (SPO) website is <http://hawaii.gov/spo/>

	For	Click
1	Procurement of Health and Human Services	“Health and Human Services, Chapter 103F, HRS...”
2	RFP website	“Health and Human Services, Ch. 103F...” and “The RFP Website” (located under Quick links)
3	Hawaii Administrative Rules (HAR) for Procurement of Health and Human Services	“Statutes and Rules” and “Procurement of Health and Human Services”
4	Forms	“Health and Human Services, Ch. 103F...” and “For Private Providers” and “Forms”
5	Cost Principles	“Health and Human Services, Ch. 103F...” and “For Private Providers” and “Cost Principles”
6	Standard Contract -General Conditions	“Health and Human Services, Ch. 103F...” “For Private Providers” and “Contract Template – General Conditions”
7	Protest Forms/Procedures	“Health and Human Services, Ch. 103F...” and “For Private Providers” and “Protests”

Non-SPO websites

(Please note: website addresses may change from time to time. If a link is not active, try the State of Hawaii website at <http://hawaii.gov>)

	For	Go to
8	Tax Clearance Forms (Department of Taxation Website)	http://hawaii.gov/tax/ click “Forms”
9	Wages and Labor Law Compliance, Section 103-055, HRS, (Hawaii State Legislature website)	http://capitol.hawaii.gov/ click “Bill Status and Documents” and “Browse the HRS Sections.”
10	Department of Commerce and Consumer Affairs, Business Registration	http://hawaii.gov/dcca click “Business Registration”
11	Campaign Spending Commission	http://hawaii.gov/campaign

III. Authority

This RFP is issued under the provisions of the Hawaii Revised Statutes (HRS), Chapter 103F and its administrative rules. All prospective applicants are charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by any prospective applicant shall constitute admission of such knowledge on the part of such prospective applicant. Failure to comply with any requirements may result in the rejection of the proposal.

Applicants are advised that the entire RFP, appendices, amendments, memorandum, written responses to questions and answers, and the

corresponding proposal shall be a part of the contract with the successful applicant.

IV. RFP Organization

This RFP is organized into five sections:

Section 1, Administrative Overview: Provides applicants with an overview of the procurement process.

Section 2, Service Specifications: Provides applicants with a general description of the tasks to be performed, delineates provider responsibilities, and defines deliverables (as applicable).

Section 3, Proposal Application Instructions: Describes the required format and content for the proposal application.

Section 4, Proposal Evaluation: Describes how proposals will be evaluated by the state purchasing agency.

Section 5, Attachments: Provides applicants with information and forms necessary to complete the application.

V. Contracting Office

The Contracting Office is responsible for overseeing the contract(s) resulting from this RFP, including system operations, fiscal agent operations, and monitoring and assessing provider performance. The Contracting Office is:

Ms. Enid Kagesa
Department of Health, Adult Mental Health Division
1250 Punchbowl Street, Room 256
Honolulu, Hawaii 96813
Phone: (808) 586-8282 Fax: (808) 586-4745

VI. Orientation

An orientation for applicants in reference to the request for proposals will be held as follows:

Date: November 3, 2011 **Time:** 9:30 am – 12:00 p.m., HST

Location: Hawaii State Hospital
Clinical Director's Conference Room, Bldg., A
45-710 Kea'ahala Road, Kaneohe, Hawaii 96744

Applicants are encouraged to submit written questions prior to the orientation.

Impromptu questions will be permitted at the orientation and spontaneous answers provided at the state purchasing agency's discretion. However, answers provided at the orientation are only intended as general direction and may not represent the state purchasing agency's position. Formal official responses will be provided in writing. To ensure a written response, any oral questions should be submitted in writing following the close of the orientation, but no later than the submittal deadline for written questions indicated in the paragraph VII. Submission of Questions.

VII. Submission of Questions

Applicants may submit questions to the RFP Contact Person identified in Section 2 of this RFP. All written questions will receive a written response from the state purchasing agency.

Deadline for submission of written questions:

Date: November 8, 2011 **Time:** 2:00 p.m. HST

State agency responses to applicant written questions will be provided by:

Date: November 14, 2011

VIII. Submission of Proposals

- A. **Forms/Formats** - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website referred to in II. Website Reference. Refer to the Proposal Application Checklist (Attachment A) for the location of program specific forms.
1. **Proposal Application Identification (Form SPO-H-200).**
Provides applicant proposal identification.
 2. **Proposal Application Checklist.** Provides applicants with information on where to obtain the required forms; information on program specific requirements; which forms are required and the order in which all components should be assembled and submitted to the state purchasing agency.
 3. **Table of Contents.** A sample table of contents for proposals is located in Section 5, Attachment B. This is a sample and meant as a guide. The table of contents may vary depending on the RFP.

4. **Proposal Application (Form SPO-H-200A).** Applicant shall submit comprehensive narratives that address all of the proposal requirements contained in Section 3 of this RFP, including a cost proposal/budget if required.

- B. **Program Specific Requirements.** Program specific requirements are included in Sections 2, Service Specifications and 3, Proposal Application Instructions, as applicable. If required, Federal and/or State certifications are listed on the Proposal Application Checklist located in Section 5, Attachment C.
- C. **Multiple or Alternate Proposals.** Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2 of this RFP. In the event alternate proposals are not accepted and an applicant submits alternate proposals, but clearly indicates a primary proposal, it shall be considered for award as though it were the only proposal submitted by the applicant.
- D. **Tax Clearance.** Pursuant to HRS Section 103-53, as a prerequisite to entering into contracts of \$25,000 or more, providers shall be required to submit a tax clearance certificate issued by the Hawaii State Department of Taxation (DOTAX) and the Internal Revenue Service (IRS). The certificate shall have an original green certified copy stamp and shall be valid for six (6) months from the most recent approval stamp date on the certificate. Tax clearance applications may be obtained from the Department of Taxation website. (Refer to this section's part II. Website Reference.) (N/A)
- E. **Wages and Labor Law Compliance.** If applicable, by submitting a proposal, the applicant certifies that the applicant is in compliance with HRS Section 103-55, Wages, hours, and working conditions of employees of providers performing services. Refer to HRS Section 103-55, at the Hawaii State Legislature website. (See part II, Website Reference.)
- **Compliance with all Applicable State Business and Employment Laws.** All providers shall comply with all laws governing entities doing business in the State. Prior to contracting, owners of all forms of business doing business in the state except sole proprietorships, charitable organizations unincorporated associations and foreign insurance companies be registered and in good standing with the Department of Commerce and Consumer Affairs (DCCA), Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website. (See part II, Website Reference.)

- F. **Hawaii Compliance Express (HCE).** Providers shall register with HCE for online proof of DOTAX and IRS tax clearance Department of Labor and Industrial Relations (DLIR) labor law compliance, and DCCA good standing compliance. There is a nominal annual fee for the service. The “Certificate of Vendor Compliance” issued online through HCE provides the registered provider’s current compliance status as of the issuance date, and is accepted for both contracting and final payment purposes. Refer to this section’s part II. Website Reference for HCE’s website address.
- G. **Campaign Contributions by State and County Providers.** Providers are hereby notified of the applicability of HRS Section 11-205.5, which states that campaign contributions are prohibited from specified State or county government Providers during the term of the contract if the providers are paid with funds appropriated by a legislative body. For more information, FAQs are available at the Campaign Spending Commission webpage. (See part II, Website Reference.)
- H. **Confidential Information.** If an applicant believes any portion of a proposal contains information that should be withheld as confidential, the applicant shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

All proposals become the property of the State of Hawaii. The successful proposal shall be incorporated into the resulting contract and shall be public record. The State of Hawaii shall have the right to use all ideas, or adaptations to those ideas, contained in any proposal received in response to this RFP. Selection or rejection of the proposal shall not affect this right.

Note that price is not considered confidential and will not be withheld.

- I. **Confidentiality of Personal Information.** Act 10 relating to personal information was enacted in the 2008 special legislative session. As a result, the Attorney General’s General Conditions of Form AG Form 103F, *Confidentiality of Personal Information*, has been amended to include Section 8 regarding protection of the use and disclosure of personal information administered by the agencies and given to third parties.
- J. **Proposal Submittal.** All mail-ins shall be postmarked by the United States Postal System (USPS) and received by the State purchasing

agency no later than the submittal deadline indicated on the attached Proposal Mail-in and Delivery Information Sheet. All hand deliveries shall be received by the State purchasing agency by the date and time designated on the Proposal Mail-In and Delivery Information Sheet. Proposals shall be rejected when:

- Postmarked after the designated date; or
- Postmarked by the designated date but not received within 10 days from the submittal deadline; or
- If hand delivered, received after the designated date and time.

The number of copies required is located on the Proposal Mail-In and Delivery Information Sheet. Deliveries by private mail services such as FEDEX shall be considered hand deliveries and shall be rejected if received after the submittal deadline. Dated USPS shipping labels are not considered postmarks.

Faxed proposals and/or submission of proposals on diskette/CD or transmission by email, website, or other electronic means is not permitted.

IX. Discussions with Applicants

- A. Prior to Submittal Deadline.** Discussions may be conducted with potential applicants to promote understanding of the purchasing agency's requirements.

In order to provide equal treatment to all applicants, questions from applicants shall be submitted in writing and answers to applicants shall be distributed to all known interested parties.

- B. After Proposal Submittal Deadline.** Discussions may be conducted with applicants whose proposals are determined to be reasonably susceptible of being selected for award, but proposals may be accepted without discussions, in accordance HAR Section 3-143-403.

From the issued date of this RFP until an applicant is selected and the selection is announced, communications with State staff may be conducted pursuant to HAR Chapter 3-143.

X. Opening of Proposals

Upon receipt of a proposal by a state purchasing agency at a designated location, proposals, modifications to proposals, and withdrawals of proposals shall be date-stamped, and when possible, time-stamped. All documents so

received shall be held in a secure place by the state purchasing agency and not examined for evaluation purposes until the submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and executed by all parties.

XI. Additional Materials and Documentation

Upon request from the state purchasing agency, each applicant shall submit any additional materials and documentation reasonably required by the state purchasing agency in its evaluation of the proposals.

XII. RFP Amendments

The State reserves the right to amend this RFP at any time prior to the closing date for the final revised proposals.

XIII. Final Revised Proposals

If requested, final revised proposals shall be submitted in the manner, and by the date and time specified by the state purchasing agency. If a final revised proposal is not submitted, the previous submittal shall be construed as the applicant's best and final offer/proposal. *The applicant shall submit **only** the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPO-H-200).* After final revised proposals are received, final evaluations will be conducted for an award.

XIV. Cancellation of Request for Proposal

The RFP may be canceled and any or all proposals may be rejected in whole or in part, when it is determined to be in the best interests of the State.

XV. Costs for Proposal Preparation

Any costs incurred by applicants in preparing or submitting a proposal are the applicants' sole responsibility.

XVI. Provider Participation in Planning

Provider participation in a state purchasing agency's efforts to plan for or to purchase health and human services prior to the state purchasing agency's release of a RFP, including the sharing of information on community needs, best practices, and providers' resources, shall not disqualify providers from submitting proposals if conducted in accordance with HAR Sections 3-142-202 and 3-142-203.

XVII. Rejection of Proposals

The State reserves the right to consider as acceptable only those proposals submitted in accordance with all requirements set forth in this RFP and which demonstrate an understanding of the problems involved and comply with the service specifications. Any proposal offering any other set of terms and conditions contradictory to those included in this RFP may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons: (Relevant sections of the Hawaii Administrative Rules for Chapter 103F, HRS, are parenthesized)

- (1) Rejection for failure to cooperate or deal in good faith. (HAR Section 3-141-201)
- (2) Rejection for inadequate accounting system. (HAR Section 3-141-202)
- (3) Late proposals (HAR Section 3-143-603)
- (4) Inadequate response to request for proposals (HAR Section 3-143-609)
- (5) Proposal not responsive (HAR Section 3-143-610(a)(1))
- (6) Applicant not responsible (HAR Section 3-143-610(a)(2))

XVIII. Notice of Award

A statement of findings and decision shall be provided to all applicants by mail upon completion of the evaluation of competitive purchase of service proposals.

Any agreement arising out of this solicitation is subject to the approval of the Department of the Attorney General as to form, and to all further approvals, including the approval of the Governor, required by statute, regulation, rule, order or other directive.

No work is to be undertaken by the awardee prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

XIX. Protests

Any applicant may file a protest against the awarding of the contract. The Notice of Protest form, SPO-H-801, is available on the SPO website. (See paragraph II, Website Reference.) Only the following matters may be protested:

- (1) A state purchasing agency's failure to follow procedures established by Chapter 103F of the Hawaii Revised Statutes;

- (2) A state purchasing agency's failure to follow any rule established by Chapter 103F of the Hawaii Revised Statutes; and
- (3) A state purchasing agency's failure to follow any procedure, requirement, or evaluation criterion in a request for proposals issued by the state purchasing agency.

The Notice of Protest shall be postmarked by USPS or hand delivered to 1) the head of the state purchasing agency conducting the protested procurement and 2) the procurement officer who is conducting the procurement (as indicated below) within five (5) working days of the postmark of the Notice of Findings and Decision sent to the protestor. Delivery services other than USPS shall be considered hand deliveries and considered submitted on the date of actual receipt by the state purchasing agency.

Head of State Purchasing Agency	Procurement Officer
Name: Loretta J. Fuddy, A.C.S.W., M.P.H.	Name: Amy Yamaguchi
Title: Director of Health	Title: Administrative Officer, Adult Mental Health Division
Mailing Address: PO Box 3378 Honolulu, HI 96801-3378	Mailing Address: PO Box 3378 Honolulu, HI 96801-3378
Business Address: 1250 Punchbowl St. Honolulu, HI 96813	Business Address: 1250 Punchbowl St. Honolulu, HI 96813

XX. Availability of Funds

The award of a contract and any allowed renewal or extension thereof, is subject to allotments made by the Director of Finance, State of Hawaii, pursuant to HRS Chapter 37, and subject to the availability of State and/or Federal funds.

XXI. General and Special Conditions of Contract

The general conditions that will be imposed contractually are on the SPO website. (See paragraph II, Website Reference). Special conditions may also be imposed contractually by the state purchasing agency, as deemed necessary.

The DIVISION may also be required to make small or major unanticipated modifications to individual contracts. Reasons for such modifications may include, but are not limited to, recommendations made by the Hawaii State Hospital, national trends, and needs of the Hawaii State Department of Health.

XXII. Cost Principles

In order to promote uniform purchasing practices among state purchasing agencies procuring health and human services under HRS Chapter 103F, state purchasing agencies will utilize standard cost principles outlined in Form SPO-H-201, which is available on the SPO website (see paragraph II, Website Reference). Nothing in this section shall be construed to create an exemption from any cost principle arising under federal law.

Section 2

Service Specifications

Section 2

Service Specifications

I. Introduction

A. Overview

The Hawaii State Hospital (HSH) is a 190-bed psychiatric hospital operated under the jurisdiction of the Department of Health (DOH). HSH serves adults who are mentally ill and/or dually diagnosed patients (i.e. medical, substance abuse, and developmental disabilities, etc.). Almost all patients are committed by either Civil or Penal Code commitment, the latter being in the majority. There are seven (7) treatment units, two (2) of which are admission/acute units. Additionally, there is an inpatient Treatment Mall, with a medication room, operated during weekdays, Monday through Friday. The hospital also operates a specialized outpatient residential facility on the hospital grounds. There is no partial hospitalization or day treatment. The majority of patients are in need of some type of drug therapy and substance abuse treatment.

A wide range of diversified pharmacy services is required by HSH to ensure optimal safe and effective drug treatments of HSH patients; to assure compliance with all State and Federal laws, rules and regulations; and to assist HSH in maintaining The Joint Commission (TJC) accreditation and meeting Centers for Medicare & Medicaid Services (CMS) certification standards.

A wide range of pharmaceutical products must be dispensed on a timely basis by a reliable pharmacy and staff, who are experienced in the treatment of persons with mental illness and substance abuse.

B. Planning activities conducted in preparation for this RFP

Internal meetings to discuss the development of this RFP were convened (among various HSH disciplines). A Request for Information (RFI) was issued on January 24, 2011 to provide all interested parties an opportunity to pose questions and to collect perspectives on the proposed services included in this RFP.

C. Description of the goals of the service

To provide quality pharmacy services and management in order to establish and maintain standards of optimal drug therapy delivery and outcomes for the patients at HSH.

To provide accurate and timely drugs from an on-site pharmacy as requested on a Monday through Friday schedule, as well as emergency 24-hour coverage, including weekends and holidays by an on-call pharmacist.

The pharmacy services and products to be provided shall relieve HSH of most direct costs associated with the operation of a pharmacy department, including, but not limited to, the cost of personnel, inventory, and computerization.

D. Description of the target population to be served

Adults who are mentally-ill and/or dually diagnosed patients (i.e. medical, substance abuse, developmental disabilities, etc.) at the HSH.

E. Geographic coverage of service

The provider will maintain, operate and manage the present pharmacy located at HSH on the island of Oahu in compliance with all State and Federal laws, rules and regulations, and with all TJC standards. Pharmaceutical services and products will be provided to HSH patients and outpatients in the state operated facility.

F. Probable funding amounts, source, and period of availability

There is high probability for continued funding throughout the contracted period. HSH will make a final determination as to the specific amount of the award. The source of funding is general funds.

The provider shall bill for drugs and biologics used by HSH patients who are covered by third-party payors and those patients who are given a drug supply upon discharge. Revenue collected shall be applied and credited to HSH's monthly charges.

II. General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. Throughout the contract period, the provider shall obtain and maintain a valid pharmacy license. At the time of proposal submittal, the applicant's pharmacist(s) shall be duly licensed to practice pharmacy in the State of Hawaii.
2. The consultant Pharmacist(s) shall have at least three (3) years direct experience with patient populations similar to the HSH in order to participate in treatment planning meetings, care plan reviews, individual psychopharmacology consultations and educational discussion with patients and staff as indicated. Thus, experience with a diverse, multicultural population with severe and persistent mental illness who may be involuntarily committed, resistant to treatment, legally encumbered, experiencing active symptoms of psychosis and have a past and/or current history of violence toward self and/or others is essential. Experience working in a forensic

facility is preferred.

3. The selected vendor shall have a minimum of three (3) years Hawaii business experience to successfully navigate the rules and regulations regarding procurement and business practices in the state of Hawaii.
4. At the time of proposal submittal, the applicant shall meet all required qualifications and shall have employees who meet all required qualifications and are available for assignment at the HSH at the contract start date of January 1, 2012.
5. All pharmacy business transactions performed from the HSH pharmacy shall be institutional in nature and shall not be made available to the general public. This pharmacy is to be considered a “closed pharmacy.”
6. The provider shall comply with all TJC standards.

B. Secondary purchaser participation

(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.
There are no planned secondary purchases.

C. Multiple or alternate proposals

(Refer to §3-143-605, HAR)

Allowed Not Allowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (≤ 2 yrs) Multi-term (> 2 yrs)

Contract Terms:	
Initial term of contract:	<u>1 year</u>
Length of each extension:	<u>12 months</u>
Number of possible extensions:	<u>5</u>
Maximum length of contract:	<u>6 years</u>
The initial period shall commence on the contract start date or Notice to Proceed.	
Conditions for extension: Mutual agreement must be made in writing sixty (60) days prior to expiration of the existing contract and the	

execution of a supplemental agreement.
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F. RFP contact person

The individual listed below is the sole point of contact from the date of release of this RFP until the selection of the successful provider or providers. Written questions should be submitted to the RFP contact person and received on or before the day and time specified in Section 1, paragraph I (Procurement Timetable) of this RFP. The contact person is Ms. Enid Kagesa. She may be reached at (808) 586-8282, fax (808) 586-4745.

III. Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities
(Minimum and/or mandatory tasks and responsibilities)

Clinical Pharmacy Services

1. The provider shall review the various aspects of the total drug distribution system of HSH. These reviews will be designed to monitor and safeguard all areas of the drug distribution system in order to assure safe and rational drug therapy to the patients and to determine the quality and storage of drugs used at HSH.
2. The provider shall make recommendations for upgrading patient care and improving the quality of life of HSH patients by providing quality clinical pharmacy services. The recommendations shall include drug product selection, formulary compliance, adjusting drug doses and schedules based on the monitoring of the effects of the drug therapies, and cost analysis and effectiveness of selected drug products. The recommendations shall be based upon drug utilization reviews by the clinical pharmacist, who shall monitor for drug allergies, drug interactions, and contraindications for use, drug-food interactions, adverse drug reactions, dosing, polypharmacy, and other related data as required.
3. The provider shall provide comprehensive quality assurance programs to establish standards in order to assure optimal drug therapy and outcomes through the collection of medication usage data. The quality assurance programs shall be designed to assure that all drugs and biologicals used at the HSH are controlled, accountable and in compliance with all Federal and State laws.
4. The provider shall actively participate in and regularly attend all pharmacy-related committees at HSH including, but not limited to, the Medication Management Function Team, Medical Staff Function Team,

Infection Control Function Team, psych-pharmacological rounds, and all required meetings relating to the provision of pharmaceutical services. The provider shall provide written reports related to pharmacy activities and monitoring to HSH bodies and committees as designated by the HSH Administration and the HSH Medical Director. The provider shall assist HSH in establishing policies and procedures relating to all HSH pharmacy areas.

5. The provider shall assure compliance with all State and Federal laws, rules and regulations, and assist HSH in maintaining TJC accreditation standards and meeting CMS requirements involving all pharmacy-related areas.
6. The provider shall act as the drug consultant to the medical staff at HSH and provide drug-related in-services.
7. The applicant shall include in their proposal the cost for ten (10) automated dispensing machines (ADM) (i.e. Omni cell, Pyxis, or medical record system (EMR), either through lease or purchase, which includes software, hardware, and technical support. The final selection of ADMs require the approval of AMHD and HSH. In addition, the provider shall provide a project manager for the duration of the implementation of the ADMs. The purchased ADMs will become the property of HSH upon termination of this contractual agreement.
8. The applicant shall participate in the implementation of an electronic Medication Administration Record. The provider shall include in their proposal the cost for ten (10) bar code scanning devices that are compatible with Netsmart's Avatar electronic medical record system software, along with at least one (1) color printer for creating patient ID's and medication related reporting. The final selection of this equipment requires the approval of AMHD and HSH. The purchased equipment will become the property of HSH upon termination of this contractual agreement.
9. The applicant shall include in their proposal the cost of ten (10) network enabled computers with licensed software and peripherals, which are dedicated to pharmacy and medication dispensing operations only. The final selection of computers to be purchased shall requires AMHD approval. At a minimum, the computers shall include Windows 7 Professional, Microsoft Office 2010, have an Intel Core I3-530, 2.93 ghz processor; 4 G RAM and a 250 G hard drive. The purchased computers will be maintained by the hospital's information technology staff and will become the property of HSH upon termination of this contractual agreement.

10. The applicant shall include in their proposal the cost to procure printers necessary to operate pharmacy services throughout the hospital, including laser and Zebra label printers. Printers shall include network cards and interface with the HSH EMR. The selection of printers require AMHD approval. The purchased equipment will become the property of HSH upon termination of this contractual agreement.
11. The provider shall explain how they will provide reports to improve drug utilization, decrease medication usage and cost, and improve patient safety in a timely manner. This will include preparation of custom reports regarding cost, (Medicare D) cost savings, physician prescribing practices and financial impact per patient (psychiatric medications and non-psychiatric medications), and regularly reporting to the hospital where cost savings can be achieved in using brand or generic medications of equivalent efficacy.

The HSH will render the decision to include the ADM, computers, bar code scanners and/or eMar [electronic Medication administration record] solutions in the contract award based on availability of funds and project scheduling and prioritization. The HSH reserves the right to implement or remove any of these components of the RFP from consideration at any time during the contract period. The applicant shall propose costs for each of these elements separately in their proposal.

12. The provider shall perform any additional pharmacy functions as requested by HSH Administration, i.e. participation in hospital meetings, forums and other activities.

Pharmaceutical Products and Services

13. The provider shall maintain current pharmacists' licenses and the pharmacy licenses for the present HSH pharmacy and provide copies of the current licenses to the HSH and DOH. The provider shall provide on-site coverage Monday through Friday between the hours of 8:00 A.M and 5:00 P.M. or a mutually agreeable schedule to meet the needs of the HSH patients and emergency coverage by a 24-hour on-call pharmacist, including weekends and holidays. The name and phone number of the on-call pharmacist(s) shall be provided to HSH at time of contract award.
14. The provider shall provide and maintain sufficient pharmacy personnel to assure adequate and uninterrupted pharmaceutical services and products for HSH.
15. The provider shall provide and maintain a sufficient drug inventory at HSH to meet the specific needs of HSH. The provider is responsible for stocking and supplying all pharmaceutical products requested and

approved for use by HSH. The provider shall comply with the HSH Drug Formulary and the policies and procedures relating to the formulary. Effectiveness, safety, and costs are factors in selecting appropriate drug inventories at HSH. A Night Cabinet of emergency drugs shall be maintained by the provider to handle after-hours needs.

16. The provider shall utilize pharmacy computerization and computer services to assure quality and consistent pharmaceutical services including, but not limited to, maintaining patient drug profiles; providing clinical drug information; generating drug utilization reviews; generating drug invoices; and providing physician order sheets, medication administration records and other pharmacy-related reports. The provider shall utilize HSH software applications, but can use its internal software applications with the approval of AMHD and HSH. HSH currently utilizes Netsmart's Avatar EMR system interfaced with the Mediware WORX pharmacy management system. Within the next year, HSH will replace the WORX system with Netsmart's RxConnect application. The provider's internal computers services shall be operated at the provider's sole cost. All reports and data collected through the contract are the property of the State and shall be collected upon termination of the contract.
17. The provider shall have a daily delivery schedule that is capable of providing pharmaceutical products within a reasonable time frame. For "stat" and emergency orders, drugs shall be delivered within one (1) hour of request. The provider shall have a 24-hour on-call pharmacist to handle after-hours needs who will have the capability to come on-site as well as log remotely into the pharmacy system to verify and dispense medication as well as consult with medical staff.
18. The provider shall have management staff located on Oahu, which directly reports to the Administration at HSH and analyzes the pharmacy operations. All issues of conflicts and concerns relating to pharmacy services, products, and billings shall be resolved at the local management staff level.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

The provider shall provide a minimum of two (2) full time equivalent (FTE) pharmacists who shall be duly licensed to practice pharmacy in the State of Hawaii; and other qualified staff necessary to provide the services required by this RFP. It is highly desirable that at least one (1) FTE pharmacists will be a Board Certified Psychiatric Pharmacist. The provider shall conduct background screenings on all employees assigned to HSH. The results of completed background checks shall be made available to HSH upon the start of the contract. If mutually

agreed upon, the number of pharmacists may be increased to support clinical services provided to the hospital by pharmacy residents. The provider shall provide a 0.50 FTE position to serve as an Admissions Coordinator and Claims and Benefits Adjudicator to support the hospital's Social Work Department and Business Office for the purpose of third party billing, benefit utilization tracking, and completing required ancillary documentation (prior authorizations, above recommended doses, etc.). Staffing shall be evaluated to continually support clinical pharmacy services. The provision of additional staffing is open for negotiation.

The provider shall have a 24-hour on-call pharmacist available seven (7) days a week, including holidays, for times outside normal business hours.

The provider shall have a management office and staff on Oahu to supervise the pharmacy operations at HSH and report directly to the Administration at HSH any variances or problems pertaining to the delivery of contracted services.

2. Administrative

- a. **Tax Liability.** Services to be performed under this RFP are a business activity taxable under Chapter 237 Hawaii Revised Statutes. Applicants are advised that the gross receipts derived from this proposal are subject to the four percent (4.00%) general excise tax and one-half percent (.5%) City and County of Honolulu surcharge tax where applicable.
- b. **Insurance.** The applicant shall provide a copy of their current insurance information.
- c. **References.** The applicant shall provide a minimum of two (2) hospitals and/or established clinical institutions in the State of Hawaii to where pharmaceutical services similar to those requested herein, have been provided or are currently being provided. The purchasing agency reserves the right to contact the references listed to inquire about the services provided by the applicant.
- d. **Wage Certificate.** The applicant shall complete and submit the Wage Certificate (see Attachment D) by which applicant certifies that the services required will be performed pursuant to Section 103-55 (HRS).
- e. **Removal of Provider's Employee.** The provider agrees to remove any of its employees providing services at HSH upon request from

the hospital Administrator.

- f. Insurance Policies. In addition to the provisions of the General Conditions No. 1.4, the provider, at its sole cost and expense, shall procure and maintain policies of professional liability insurance and other insurance necessary to insure the provider and its employees against any claim or claims for damages arising by reason of personal injuries or death occasioned directly or indirectly in connection with the performance of this contract. Subcontractors and contractors shall also be bound by this requirement and it is the responsibility of the provider to ensure compliance with this requirement.

The provider shall obtain, maintain, and keep in force throughout the period of this Contract the following types of insurance:

General Liability insurance issued by an insurance company in the amount of at least ONE MILLION AND NO/100 DOLLARS (\$1,000,000.00) for bodily injury and property damage liability arising out of each occurrence and not less than TWO MILLION AND NO/100 DOLLARS (\$2,000,000.00) in the aggregate annually.

Professional Liability insurance issued by an insurance company in the amount of at least ONE MILLION AND NO/100 DOLLARS (\$1,000,000.00) for liability arising out of each occurrence and not less than FIVE MILLION AND NO/100 DOLLARS (\$5,000,000.00) in the aggregate annually

Automobile Insurance issued by an insurance company in an amount of at least ONE MILLION AND NO/100 DOLLARS (\$1,000,000.00) per accident/occurrence.

All policies shall be made by occurrence and not on a claims-made basis.

The insurance shall be obtained from a company authorized by the law to issue such insurance in the State of Hawaii (or meet Section 431:8-301, Hawaii Revised Statutes, if utilizing an insurance company not licensed by the State of Hawaii).

The provider shall name the State of Hawaii as an additional insured on all such policies, except on professional liability insurance coverage. The provider shall provide certificates of insurance to the DIVISION for all policies required under this contract.

The provider shall ensure that the above policy limits are in place throughout the duration of the contract period. The provider shall also immediately provide written notice to the contracting department or agency should any of the insurance policies evidenced on its Certificate of Insurance form be canceled, limited in scope, or not renewed upon expiration.

3. Quality assurance and evaluation specifications

The provider shall have quality assurance programs to monitor the level of pharmaceutical services and evaluation and improvement plans for proposed services and personnel.

The provider shall submit a copy of their Quality Management Plan and any non-confidential documentation that demonstrates its organizational commitment to process improvement.

4. Output and performance/outcome measurements

The provider shall provide written documentation relating to medication event reports to the Quality Improvement department at HSH. These reports and measurements shall include medication dispensing errors, medication administration errors, physician prescribing errors, adverse drug reactions, and polypharmacy incidents. The provider shall work with the HSH staff to insure that medication events are minimized.

5. Contract Compliance

The State performs periodic reviews, including validation studies, in order to ensure contract compliance.

6. Experience

The applicant shall have a minimum of three (3) years of experience in the provision of pharmacy services in Hawaii.

7. Coordination of services

The provider shall demonstrate capability to coordinate services with other direct care units within the HSH.

8. Reporting requirements for program and fiscal data

The provider shall provide an annual and, as requested, written pharmacy reports to the appropriate HSH committees which analyze

all the pharmacy services outlined in this proposal. The annual reports shall be submitted to the HSH Administrator no later than thirty (30) days from the end of each contract period.

The provider shall provide a monthly billing invoice, in triplicate, which includes the cost of drugs used at HSH for the month.

The provider shall bill third-party payers, such as Medicare, for pharmaceuticals and services for those patients who are covered and provide monthly reports to HSH Administration and the HSH Business Office for data analysis purposes. Any revenue collected shall be applied and credited to the HSH monthly invoices.

9. Pricing structure or pricing methodology to be used

The HSH is permitting the use of a pricing structure based on unit of service rate (based on the average monthly number of patients).

Proposals are requested for the following categories of this RFP, which consists of three (3) parts: Part A, Clinical Pharmacy Services; Part B, Medication Dispensing System; and Part C, Pharmaceutical Products and Services.

Part A: The cost to provide Clinical Pharmacy Services (as described in Scope of Work, A, numbers 1 through 6) at HSH. Include proposed price for the average monthly number of patient (HSH census) indicated below:

Price Per Month for:

181 to 200 patients \$ _____ x 12 months = \$ _____
 161 to 180 patients \$ _____ x 12 months = \$ _____
 141 to 160 patients \$ _____ x 12 months = \$ _____
 121 to 140 patients \$ _____ x 12 months = \$ _____
 101 to 120 patients \$ _____ x 12 months = \$ _____
 100 and less patients \$ _____ x 12 months = \$ _____

Part B: The cost to provide (lease or purchase) ten (10) Automated Dispensing Machine Systems, participate in the implementation of an electronic Medication Administrative Records (eMAR) system, ten (10) bar code scanning devices, provide ten (10) workstation computers, and provide the necessary printers, including laser and bar code printers, as described in Scope of Work.

Part C: Costs of Pharmaceutical Products and Services (as described in Scope of Work, A, numbers 13 through 17).

Percentage rate by which the prevailing manufacturer’s published list prices (average wholesale price) of pharmaceutical products will be adjusted. The rate submitted shall be no greater than the average wholesale price (AWP).

_____ %

The following shall be completed by applicant based on the percentage rate offered in Part C and the unit price for the pharmaceuticals listed as shown on the manufacturer’s most recent published list price which is to be included with the proposal submittal. The estimated cost per year that is to be calculated is for proposal evaluation purposes only.

* Total Est. Cost Per Year = Adjusted Base Price Per Unit x Estimated Quantity.

The Proposal Price shall include all labor, required supplies, computer services, applicable taxes, delivery charges and any other costs necessary to perform the services specified herein.

<u>Name of Pharmaceutical</u>	<u>Estimated Quantity</u>	<u>Unit Price</u>	<u>Discount Rate Part C</u>	<u>Adjusted Base Price per Unit</u>	<u>Total Est. Cost Yearly</u>
1) Depakote 500 mg. Unit Dose (U.D.)	45,000	\$ _____	_____ % =	\$ _____	\$ _____
2) Risperdal Consta 50 mg. U.D. (Injection)	2,000	\$ _____	_____ % =	\$ _____	\$ _____
3) Zyprexa 20 mg. U.D.	14,000	\$ _____	_____ % =	\$ _____	\$ _____
4) Clozaril 100 mg. U.D.	8,000	\$ _____	_____ % =	\$ _____	\$ _____
5) Seroquel 800 mg. U.D.	10,000	\$ _____	_____ % =	\$ _____	\$ _____
6) Geodon 160 mg. U.D.	8,000	\$ _____	_____ % =	\$ _____	\$ _____
7) Abilify 30 mg. U.D.	8,000	\$ _____	_____ % =	\$ _____	\$ _____

Estimated Cost per year for Part C (Add last column, rows 1) – 7)): \$ _____

Proposal Price for 12 months for Part A: \$ _____

Proposal Price for Part B: \$ _____

TOTAL PROPOSAL PRICE FOR EVALUATION PURPOSES: \$_____

* Total Est. Cost per Year = Adjusted Base Price per Unit x Estimated Quantity

The provider shall provide HSH an updated AWP drug list quarterly to verify monthly drug charges.

C. Facilities

The provider shall operate the pharmacy at a designated location within the HSH's facilities. Use of the space, utilities including telephone and communications, housekeeping services and routine facility maintenance will be provided at no cost to the provider. A floor plan of the pharmacy location is included in Section 5, Attachment E.

Section 3

Proposal Application Instructions

Section 3

Proposal Application Instructions

General instructions for completing applications:

- *Proposal Applications shall be submitted to the state purchasing agency using the prescribed format outlined in this section. The proposal shall be organized and presented in the sections and subsections designated in the RFP and with prescribed content for each section.*
- *The numerical outline for the application, the titles/subtitles, and the applicant organization and RFP identification information on the top right hand corner of each page should be retained. The instructions for each section however may be omitted.*
- *Page numbering of the Proposal Application should be consecutive, beginning with page one (1) and continuing through the complete proposal.*
- *Proposals may be submitted in a three ring binder (Optional).*
- *Tabbing of sections is required. Each tab should be placed on a separate sheet of paper and shall not be counted as a page.*
- *Proposals should be single-spaced, with double spacing between each paragraph and section, and 1" margins on all sides, utilizing a 12 point font size.*
- *Applicants must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment B of this RFP.*
- *A written response is required for **each** item unless indicated otherwise. Failure to answer any of the items will impact an applicant's score.*
- *This form SPO-H-200A is available on the SPO website (Section 1, paragraph II, Website Reference). However, the form will not include items specific to each RFP. If using the website form, the applicant must include all items listed in this section.*
- *One (1) original and two (2) copies (one unbound) of each proposal are required.*
- *Applicants are strongly encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal.*

The Proposal Application comprises the following sections:

- *Proposal Application Identification Form*
- *Table of Contents*
- *Program Overview*
- *Experience and Capability*
- *Project Organization and Staffing*
- *Service Delivery*
- *Financial (All required forms and documents)*
- *Program Specific Requirements (as applicable)*
- *Other*

I. Program Overview

Applicant shall give a brief overview to orient evaluators as to the program/services being offered. No points are assigned to the Program Overview.

II. Experience and Capability

Ensure that each section is answered completely and thoroughly. Each section shall be scored individually and separately from another section. Applicants are responsible to place the appropriate information in each section to be scored.

A. Necessary Skills

The applicant shall demonstrate that it has the necessary skills, abilities, and knowledge relating to the comprehensive drug distribution system delivery of the proposed services.

B. Experience

The applicant shall provide a thorough description of past and current projects/contracts pertinent to the proposed services specific to providing in-patient hospital settings and including outpatient services.

The applicant shall include points of contact, addresses, email and phone numbers. The State reserves the right to contact references to verify experience. References shall not include employees of AMHD or HSH.

C. Quality Assurance and Evaluation

The applicant shall describe its own plans for quality assurance and evaluation for the proposed services, including methodology.

1. The applicant shall sufficiently describe its quality assurance programs to establish standards to optimal drug therapy and outcomes.
2. A quality assurance program designed to assure that all drugs and biologicals used are controlled, accountable and in compliance with all Federal and State laws, rules and regulations.

D. Coordination of Services

The applicant shall demonstrate, through description and documentation, the capability or plan to coordinate services with other agencies and HSH departments.

E. Facilities

Not applicable to this RFP. Services shall be provided within the HSH facility.

F. Management Information System Requirements

The applicant shall submit a description of its current and future management information system (MIS). The description shall include, but not be limited to, the following:

1. A statement about whether the applicant is a covered entity as defined by HIPAA. A statement that the applicant will comply with all HIPAA privacy, security and transactional code set requirements.
2. An explanation of how the applicant will manage information in order to submit required information and data in the format prescribed by the HSH. Required data elements captured in the provider system and reported to the HSH may include, but are not limited to: patient's last name, first name, middle name, any aliases, social security number, HSH-generated unique ID number, Medicaid Identification Number, Medicare Identification Number, other third party insurer numbers, address, telephone number, admission date, discharge date, service data using HSH approved procedure codes, date of birth, gender, and primary language spoken.

III. Project Organization and Staffing**A. Staffing****1. Proposed Staffing**

The applicant shall describe the proposed staffing and caseload capacity appropriate for the viability of the services. (Refer to personnel requirements in the Service Specifications, as applicable.).

2. Staff Qualifications

The applicant shall provide the minimum qualification (including experience) for staff assigned to the program. (Refer to qualifications in the Service Specification, as applicable).

The applicant shall identify any Board Certified Psychiatric Pharmacist and any academic affiliations. Local academic affiliations are preferred.

B. Project Organization

1. Supervision and Training

The applicant shall describe its ability to supervise, train, and provide administrative direction relative to the delivery of the proposed services. Proof of competencies of staff shall be maintained in accordance with TJC and HSH standards.

2. Organization Chart

The applicant shall reflect the position of each staff and line of responsibility/supervision. (Include position title, name and full time equivalency) Both the “Organization-wide” and “Program” organization charts shall be attached to the Proposal Application.

3. Evidence of Licensure/Accreditation

The applicant shall submit documentation of valid and appropriate licensure and/or accreditation.

IV. Service Delivery

Applicant shall include a detailed discussion of the applicant’s approach to applicable service activities and management requirements from Section 2, Item III. - Scope of Work, including (if indicated) a work plan of all service activities and tasks to be completed, related work assignments/responsibilities and timelines/schedules.

A. A detailed description of the service which the applicant is proposing to provide including:

Service Activity	Unit Cost/ Total cost	Identify whether purchasing or leasing equipment	Check if unable to provide	Description/Explanation
1. Provision of ten (10) workstation computers for use in Medication Rooms				

2. Provision and implementation of ten (10) ADMs				
3. Project Manager for ADM implementation				
4. Participates in eMAR implementation				
5. Provision of ten (10) bar code scanning devices for eMar implementation				
6. Provision of printers (itemized by make and model)				

- B. Applicant has a minimum of three (3) years of experience providing proposed services in the State of Hawaii.
- C. How the applicant will integrate best practices and/or evidence based practices into the treatment.
- D. Applicants involvement in decisions regarding provision of services.
- E. A statement by the applicant that it is ready, able, and willing to provide services throughout the time of the contract period.
- F. A statement by the applicant that it has read and understands the Request for Proposal and will comply with the HSH requirements.

V. Financial

A. Pricing Structure

Applicant shall submit a cost proposal utilizing the pricing structure designated by the state purchasing agency. The cost proposal shall be attached to the Proposal Application.

1. Pricing structure is based on Unit of Service Rate, which is based on the average number of patients. Proposal for Parts A, B, and C in this RFP describing and providing for the “Scope of Work” may be submitted for the cost proposal section
2. To review the cost proposal the applicant shall submit with the Proposal Application the following budget forms:
 - SPO-H-205 – Budget
 - SPO-H-205A – Organization-Wide Budget by Source of Funds (special instructions are located in Section 5)
 - SPO-H-206A – Budget Justification – Personnel: Salaries & Wages
 - SPO-H-206B – Budget Justification – Personnel: Payroll Taxes, Assessments & Fringe Benefits
 - SPO-H-206C – Budget Justification – Travel-Inter-Island*
 - SPO-H-206E – Budget Justification – Contractual Services – Administrative*
 - SPO-H-206F – Budget Justification – Contractual Services – Subcontracts*
 - SPO-H-206H – Budget Justification – Program Activities*
 - SPO-H-206I – Budget Justification – Equipment Purchases*

*These forms are to be submitted only if cost items are included in the proposed budget (Example: if you included Inter-Island Travel as a budgeted item, submit Form SPO-H-206C).

All budget forms, instructions and samples are located on the SPO website (see Section 1, paragraph II Websites referred to in this RFP). The budget form(s) shall be submitted with the Proposal Application:

B. Other Financial Related Materials

1. Accounting System

In order to determine the adequacy of the applicant’s accounting system as described under the administrative rules, the following documents are requested as part of the Proposal Application (may be attached):

- a) The applicant shall submit a cost allocation plan showing how cost is allocated across different funding sources.
- b) The applicant shall submit a copy of their single audit report, financial audit, or compiled financial statement for fiscal years (FY) 2009 and 2010. The FY 2009 and FY 2010 reports or financial statements shall indicate minimal or no material deficiencies and an adequacy of their accounting system.

If an applicant has not had their FY 2010 single audit report, financial audit or compiled financial statement completed, they shall submit a statement indicating when the FY 2010 audit report or FY 2010 compiled financial statement shall be completed, and may submit their completed audits or compiled financial statements for FY 2008 and FY 2009.

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

Section 4

Proposal Evaluation

Section 4 Proposal Evaluation

I. Introduction

The evaluation of proposals received in response to the RFP will be conducted comprehensively, fairly and impartially. Structural, quantitative scoring techniques will be utilized to maximize the objectivity of the evaluation.

II. Evaluation Process

The procurement officer or an evaluation committee of designated reviewers selected by the head of the state purchasing agency or procurement officer shall review and evaluate proposals. When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

The evaluation will be conducted in three phases as follows:

- Phase 1 - Evaluation of Proposal Requirements
- Phase 2 - Evaluation of Proposal Application
- Phase 3 - Recommendation for Award

Evaluation Categories and Thresholds

Evaluation Categories

Possible Points

Administrative Requirements

Proposal Application

Program Overview	0 points
Experience and Capability	25 points
Project Organization and Staffing	20 points
Service Delivery	30 points
Financial	25 Points

100 Points

TOTAL POSSIBLE POINTS

100 Points

III. Evaluation Criteria

A. Phase 1 - Evaluation of Proposal Requirements

1. Administrative Requirements

- Proposal Application Identification Form (Form SPO-H-200)
- Proposal Application Checklist (Form SPO-H)
- Wage Certificate

2. Proposal Application Requirements

- Proposal Application Identification Form (Form SPO-H-200)
- Table of Contents
- Program Overview
- Experience and Capability
- Project Organization and Staffing
- Service Delivery
- Financial (All required forms and documents)
- Program Specific Requirements (as applicable)
 - Pharmacy License
 - Pharmaceutical Manufacturer's Published Price List (most current)

B. Phase 2 - Evaluation of Proposal Application (100 Points)

Program Overview: No points are assigned to Program Overview. The intent is to give the applicant an opportunity to orient evaluators to the service(s) being offered.

1. Experience and Capability Total 25 POINTS

The State will evaluate the applicant's experience and capability relevant to the proposal contract, which shall include:

a. Necessary Skills

Applicant demonstrated skills, abilities, and knowledge relating to the delivery of services. (7 pts)

b. Experience

Applicant has demonstrated past experience in operating and managing pharmacies primarily in hospital settings. (6 pts)

c. Quality Assurance and Evaluation

Applicant has a sufficient quality assurance and evaluation plans for the proposed services, including methodology. **(5 pts)**

d. Coordination of Services

Applicant has demonstrated the capability to coordinate services with other agencies and has a successful history of coordination of services. **(5 pts)**

e. Facilities

Not applicable to this RFP. Services shall be provided within the HSH facility. **(0 pts)**

f. Management Information Systems

Demonstrate that their management information system shall include, but not be limited to, the following:

- 1) Relative to HIPAA requirements; and
- 2) An explanation of how the applicant currently manages information in order to submit required information and data in the format prescribed by the HSH. **(2 pts)**

2. Project Organization and Staffing Total 20 POINTS**a. Staffing**

- 1) Proposed Staffing pattern: That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to ensure viability of the services. **(4 pts)**
- 2) Staff Qualifications: Minimum qualifications (including experience) for staff assigned to the program. **(3 pts)**
- 3) Board certified psychiatric pharmacist. **(4 pts)**
- 4) Local academic affiliations and partnerships. **(3 pts)**

b. Project Organization

- 1) Supervision and Training: Demonstrated ability to supervise, train and provide administrative direction to staff relative to the delivery of the proposed services. **(4 pts)**
- 2) Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall services activity and tasks. **(2 pts)**

3. Service Delivery**Total 30 POINTS**

Evaluation criteria for this section will assess the applicant's approach to the service activities and management requirements outline in the Proposal Application. This section should reflect that the applicant has thorough understating of the scope of services being proposed and that the applicant's service delivery system is capable of meeting the goals and objectives of the RFP. Evaluation of this section will include, but not necessarily be limited to descriptions of:

- a. The applicant shall include an implementation plan with a narrative assessment of the logic of the work plan for the major service activities and tasks to be completed, including clarity in work assignments and responsibilities, and the realism of the timelines and schedules as applicable. **(14 pts)**
- b. Applicant has a minimum of three (3) years of experience providing proposed services in the State of Hawaii. **(3 pts)**
- c. Describe applicant's participation and delivery of the electronic Medication Administration (eMAR) implementation services. **(4 pts)**
- d. Ability to reasonably provide and implement ten (10) Automated Dispensing Machines (ADM). The vendor shall provide a list of exact manufacturer, make and model and obtain approval from the HSH Management Information Systems staff prior to actual purchase. **(4 pts)**
- e. Ability to reasonably procure (10) bar code scanning devices for eMAR implementation. The vendor shall provide a list of exact manufacturer, make and model and obtain approval from the

HSH Management Information Systems staff prior to actual purchase. **(1 pt)**

- f. Ability to reasonably procure ten (10) workstation computers for use in medication rooms. The vendor shall provide a list of exact manufacturer, make and model and obtain approval from the HSH Management Information Systems staff prior to actual purchase. **(1 pt)**
- g. Identify the past experience of the proposed project manager with ADM implementation. **(2 pts)**
- h. Provide a list of the make and model of printers. The vendor shall provide a list of exact manufacturer, make and model and obtain approval from the HSH Management Information Systems staff prior to actual purchase. **(1 pt)**

4. Financial

Total 25 Points

Pricing structure based on Unit Service Rate based on the average of number of patients.

The award, if any shall be made to the responsible applicant offering competitive and reasonable prices for this proposal.

- a. Personnel Costs: Base salaries and wage range are reasonable for the services rendered. Indicate personnel policies and procedures governing vacation leave, sick leave, overtime pay, and fringe benefits. **(6 pts)**

Operating costs are reasonable and adequately justified, and the budgets included in the proposal supports the scope of services and requirements of the RFP. **(3 pts)**

- b. Cost Allocation Plan: Applicant's description of the methods and procedures used to allocate costs are fiscally sound. **(2 pts)**
- c. The single audit report or financial audit for fiscal years 2009 and 2010 indicates minimal or no material deficiencies and an adequacy of their accounting system. If an Applicant's agency has not had their 2010 financial audit completed, they shall submit a statement indicating when their 2010 audit shall be completed, and may submit their completed audits for 2008 and 2009. Applicant has the cash-flow to sustain their entire organization for a minimum of two months. **(3 pts)**

- d. Hardware including ADM, computers, bar code scanning devices, and printers associated services **(3 pts)**
- e. Pharmaceutical Products and Services **(8 pts)**

C. Phase 3 – Recommendation for Award

Each notice of award shall contain a statement of findings and decision for the award and non-award of the contract to each applicant.

Section 5

Attachments

- A. Competitive Proposal Application Checklist
- B. Sample Table of Contents for the POS Proposal Application
- C. Certifications
- D. Wage Certificate
- E. Pharmacy Floor Plan

Proposal Application Checklist

Applicant: _____

RFP No.: HTH 430-12-002

The applicant's proposal must contain the following components in the order shown below. This checklist must be signed, dated and returned to the purchasing agency as part of the Proposal Application. SPOH forms are on the SPO website. See Section 1, paragraph II Website Reference.*

Item	Reference in RFP	Format/Instructions Provided	Required by Purchasing Agency	Completed by Applicant
General:				
Proposal Application Identification Form (SPO-H-200)	Section 1, RFP	SPO Website*	X	
Proposal Application Checklist	Section 1, RFP	Attachment A	X	
Table of Contents	Section 5, RFP	Section 5, RFP	X	
Proposal Application (SPO-H-200A)	Section 3, RFP	SPO Website*	X	
Tax Clearance Certificate (Form A-6)	Section 1, RFP	Dept. of Taxation Website (Link on SPO website)*	X	
Cost Proposal (Budget)				
SPO-H-205	Section 3, RFP	SPO Website*	X	
SPO-H-205A	Section 3, RFP	SPO Website* Special Instructions are in Section 5	X	
SPO-H-205B	Section 3, RFP,	SPO Website* Special Instructions are in Section 5		
SPO-H-206A	Section 3, RFP	SPO Website*	X	
SPO-H-206B	Section 3, RFP	SPO Website*	X	
SPO-H-206C **	Section 3, RFP	SPO Website*	X	
SPO-H-206D **	Section 3, RFP	SPO Website*		
SPO-H-206E **	Section 3, RFP	SPO Website*	X	
SPO-H-206F **	Section 3, RFP	SPO Website*	X	
SPO-H-206G **	Section 3, RFP	SPO Website*		
SPO-H-206H **	Section 3, RFP	SPO Website*	X	
SPO-H-206I **	Section 3, RFP	SPO Website*	X	
SPO-H-206J **	Section 3, RFP	SPO Website*		
Certifications:				
Federal Certifications		Section 5, RFP		
Debarment & Suspension		Section 5, RFP		
Drug Free Workplace		Section 5, RFP		
Lobbying		Section 5, RFP		
Program Fraud Civil Remedies Act		Section 5, RFP		
Environmental Tobacco Smoke		Section 5, RFP		
Program Specific Requirements:				
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Proposal Form	Section 5, RFP			

Authorized Signature

Date

** If applicable.

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CERTIFICATIONS

1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- (b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- (d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the applicant not be able to provide this certification, an explanation as to why should be placed after the assurances page in the application package.

The applicant agrees by submitting this proposal that it will include, without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transactions" in all lower tier covered transactions (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free workplace in accordance with 45 CFR Part 76 by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about--
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- (d) Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central

- point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted--
 - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
 - (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

For purposes of paragraph (e) regarding agency notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Office of Grants and Acquisition Management
Office of Grants Management
Office of the Assistant Secretary for Management and Budget
Department of Health and Human Services
200 Independence Avenue, S.W., Room 517-D
Washington, D.C. 20201

3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the under-

signed, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

- (2) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED

WAGE CERTIFICATE
(For Service Contracts)

Subject: RFP No.: _____

Title of RFP: _____

(To be completed by Applicant)

Pursuant to Section 103-55, Hawaii Revised Statutes (HRS), I hereby certify that if awarded the contract in excess of \$25,000, the services to be performed will be performed under the following conditions:

1. The services to be rendered shall be performed by employees paid at wages or salaries not less than the wages paid to public officers and employees for similar work; and
2. All applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety will be fully complied with.

I understand that failure to comply with the above conditions during the period of the contract shall result in cancellation of the contract, unless such noncompliance is corrected within a reasonable period as determined by the procurement officer. Payment in the final settlement of the contract or the release of bonds, if applicable, or both shall not be made unless the procurement officer has determined that the noncompliance has been corrected; and

I further understand that all payments required by Federal and State laws to be made by employers for the benefit of their employees are to be paid in addition to the base wage required by section 103-55, HRS.

Applicant _____

Signature _____

Title _____

Date _____

BUILDING 6 - MEDICAL SERVICES FLOOR PLAN

● FIRE EXTINGUISHER

