



Request for Proposals

Strategic Planning for Sustainable Clinical Infrastructure

Date Issued: February 8, 2023
Amendment #1: February 21, 2023

Submission Due Date: March 17, 2023

RELEASED BY:



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Table of Contents

SECTION I: SUMMARY OF THE RFP3

SECTION II: SCOPE OF SERVICES 5

SECTION III: COMPLETING THE PROPOSAL..... 12

SECTION IV: EVALUATION, AND AWARD PROCEDURES.....15

SECTION V: GENERAL DISCLOSURES.....18

- A. Right to Amend, Cancel This RFP, or Solicit a New RFP
- B. Right to Reject Proposals
- C. Insurance
- D. NYC Vendor Registration
- E. Proposal Costs
- F. Fulfillment of Requirements
- G. Submitted Information

Section I: Overview

This Request for Proposals (RFP) is issued by the Fund for Public Health in New York City (FPHNYC), on behalf of the New York City (NYC) Department of Health and Mental Hygiene's (NYC Health Department) Division of Disease Control to seek proposals from consultants/firms to develop a strategic plan to revitalize its clinical services and express testing infrastructure. The strategic planning process will result in a comprehensive plan to implement and sustain clinical services and operations that advance public health goals for interrupting transmission of infectious diseases of public health concern and meet emergency public health response needs.

A. RFP Timetable

EVENT	DATE
Release of Request for Proposals	Wednesday, February 8, 2023
Deadline for Written Questions	February 15, 2023 - 11:59 PM EST
Q&A Posted	February 22, 2023
Deadline for Receipt of Proposals	Friday, March 17, 2023 - 11:59 PM EST
Expected Notice of Award*	Friday, April 21, 2023
Expected Project Start Date*	June 1, 2023
Project End Date	June 30, 2024

*Notice of award and project start dates are target dates only. FPHNYC may amend the schedule as needed.

B. Applicant Eligibility

Eligible applicants include academic institutions, public and private research organizations, non-profit organizations, for-profit companies, and consultants or consulting firms with the following:

- A minimum of five (5) years' experience in strategic planning for healthcare organizations;
- A minimum of five (5) years' experience improving public health and ambulatory care clinical operations, preferably at federally qualified health centers (FQHCs) or government operated clinics/health centers;
- A minimum of five (5) years' experience working on clinical, laboratory, and administrative processes for prevention, screening, and management of infectious diseases, including clinical guidelines, accreditation standards, reimbursement, staffing levels, etc.;
- A minimum of three (3) years' experience working with and/or assessing the New York City healthcare delivery system; and
- Availability to provide services from notice of award to June 2024.

Preference will be given to Minority and Women Owned Business Enterprises.

C. Funding Overview and Timeline

FPHNYC and NYC Health Department intend to make a single award as a result of this RFP, up to a maximum of \$400,000. Actual award amount will be based upon the budget submitted by the Applicant. Funding for this project is made possible by a grant from the TD Charitable Foundation.

The selected consultant will enter into a fixed-price contract with FPHNYC to complete the services specified below. It is expected that the contract will begin on or about June 1, 2023 and continue through June 30, 2024.

D. RFP Inquiries, Written Questions and Answers

Questions and requests for clarification about this RFP must be submitted via e-mail to procurement@fphnyc.org with the subject line of "Strategic Planning for Sustainable Clinical Infrastructure." All questions and inquiries must be received by February 15, 2023 by 11:59 p.m. EDT. Any questions received after the deadline may not be answered.

The Q&A will be posted at: <https://www.fphnyc.org/get-involved/rfps/>.

Applicants are encouraged to check the webpage frequently to stay informed throughout the procurement process.

E. Submission Instructions

Completed proposals must be submitted electronically. Please format all documents submitted in response to this RFP in accordance with the provided instructions. Proposals must be **e-mailed** to the following address, no later than **Friday, March 17, 2023 - 11:59 PM EST.**

Subject: Strategic Planning for Sustainable Clinical Infrastructure

E-mail: procurement@fphnyc.org

Interested Applicants should follow the proposal instructions in Section III: Completing the Proposal.

F. Addenda to the RFP

If necessary, FPHNYC will issue addenda to amend conditions or requirements relating to the RFP. Any addenda to the RFP will be posted on the FPHNYC website: <https://www.fphnyc.org/get-involved/rfps/>. Applicants are encouraged to check the website prior to submitting their final proposal.

Section II: Scope of Services

A. Background/Purpose

The New York City Department of Health and Mental Hygiene (NYC Health Department) is one of the leading public health agencies in the world. Within the Health Department sits the Division of Disease Control, its infectious disease arm. The mission of the Division of Disease Control is to safeguard the health of New Yorkers through the identification, surveillance, treatment, control, and prevention of infectious diseases. This is accomplished through the work of its seven bureaus – Bureau of Division Management and Systems Coordination (DMSC); Bureau of Tuberculosis Control (BTBC); Bureau of Hepatitis, HIV, and Sexually Transmitted Infections (BHHS); Bureau of Communicable Diseases (BCD); Bureau of Immunization (BOI); Bureau of Public Health Laboratory (PHL); and Bureau of Public Health Clinics (BPHC).

BPHC is Disease Control's newest Bureau, established in July 2021 to reorganize all direct clinical services under one team. BPHC operates eight Sexual Health Clinics, four Tuberculosis (TB) Chest Centers and, soon, one Immunization Clinic. Annually, these clinics provide services to over 90,000 patients. In addition to these long-standing infectious disease clinics, the COVID-19 pandemic necessitated that Disease Control stand up 9 COVID express testing sites across four boroughs. Some sexual health clinics were refitted as COVID express testing sites while in other parts of the City, NYC Health Department opened brand new clinics to provide COVID express testing. These express testing clinics were developed in partnership between BPHC and PHL to offer patients immediate clinical and testing services with a short (<24 hours) turnaround time for results. The COVID express testing clinics have been instrumental in NYC's ability to respond effectively and efficiently to COVID-19. Over a two-and-a-half-year period, the express testing sites provided 359,414 PCR Nasopharyngeal confirmatory laboratory tests to New Yorkers in real-time.

NYC Health Department is looking to evaluate its clinical and laboratory infrastructure and services and develop a strategic plan for delivering integrated services that contribute to public health goals. This includes express testing for STIs and other conditions that can extend to other emergency clinical and laboratory services in the event of an outbreak.

The evaluation and subsequent strategic plan will need to:

1. Clearly define the role of NYC Health Department's public health clinics within the larger NYC health care delivery system;
2. Propose a clear path toward sustainable clinical and lab services, taking into account existing resources as well as current and expected revenue; and
3. Determine what new systems and resources may be needed to successfully manage emerging health crises while minimizing disruption of core sexual health, TB, and immunization services.

B. Project Scope of Work

Through this RFP, NYC Health Department seeks a consultant/firm to:

1. Assess the Health Department's clinical and laboratory structures, technology systems, resources, needs, and clinic clients and determine gaps in services.
 - Conduct a comprehensive review of clinical and laboratory services, workflows, staffing levels, organizational structures, technological systems, equipment, supplies, and budget.

- Conduct informational interviews among BPHC, PHL, and Disease Control leadership and staff to understand strengths and weaknesses of clinic sites, short and long-term goals for clinical operations, and how the clinics fit within NYC Health Department’s priorities.
 - i. Interviews should probe root causes of any barriers or challenges to effective clinical and laboratory structures that emerge.
 - Evaluate BPHC patient populations, clinic locations, and needs of the community to assess if clinics are providing needed infectious disease services, particularly for NYC’s most vulnerable populations.
 - i. Define the role of the public health clinics within the larger NYC health care/ ambulatory care delivery system.
 - ii. Identify gaps within the NYC delivery system that Health Department clinics may be suited to fill to achieve public health goals.
2. Research and synthesize evidence-informed standards for clinical and laboratory operations and sustainability models, with an emphasis on FQHCs and government operated health centers.
- Methods may include, but not be limited to, interviews with leadership and staff at other health departments or health centers with similar clinical and laboratory structures.
 - Topics should include, but not be limited to:
 - i. Types of services offered at other similar health centers.
 - ii. Sustainable sources of funding and revenue.
 - 1. This may include reimbursement for services provided to both insured and uninsured patients, grant funding, and other sources of support.
 - iii. Staffing options for a flexible, cross-trained workforce able to scale up and down based on public health needs.
 - 1. This may include types of staff, qualifications, and salaries.
 - iv. Equipment and supply inventories.
3. Develop a comprehensive strategic plan to make integrated clinical and lab services sustainable long-term.
- Elicit, draft, and refine equity-focused goals and objectives for NYC Health Department clinical services.
 - Propose an array of day-to-day services that may be pivoted and scaled for public health emergency responses.
 - Develop clear, detailed, and goal-oriented implementation and sustainability plans for clinical and laboratory services according to a timeline.
 - i. Plans must include, at minimum:
 - 1. Comparison of current state to future state to demonstrate gaps and the investment required to achieve the future state.
 - 2. Numbers and types of clinics, their locations, and the specific clinical and laboratory services to be offered at each location under the future state.
 - a. Criteria to consider before adopting new services.
 - 3. Staff roles and qualifications, staffing levels by site, and organizational structures by site under the future state.
 - 4. Equipment and supplies, by site, under the future state and policies and procedures for inventory management.

5. Budgets for implementing and maintaining clinical and laboratory services under the future state, by site, and recommended sources of funding and revenue.
 - a. Policies and procedures for obtaining reimbursement for services provided to both insured and uninsured patients.
 6. Policies and procedures for pivoting and scaling services for public health emergency responses.
 7. Information technology systems enhancements required to achieve the future state.
4. Provide ad hoc consultation services for clinical and laboratory services during the contract period to inform real-time decision making for the public health clinics.

C. Schedule of Deliverables

The consultant will be expected to complete the following deliverables as outlined in the table below:

SCOPE	DELIVERABLES	MINIMUM REQUIRED ACTIVITIES	DUE DATE
<p>Assess both the Health Department's clinical and laboratory structures, technology systems, resources, and needs, as well as clinic clients and determine gaps in service needs and populations served.</p>	<p>Deliverable 1: Assessment and evaluation kick off meeting</p>	<p>Schedule and facilitate a meeting with Health Department project team to discuss project goals and objectives and desired future state as well as assessment methods, approach, content, and timeline.</p>	<p>Within 1 month of project start date</p>
	<p>Deliverable 2: Informational interview plan and tools/guides</p>	<p>Provide a detailed plan outlining proposed informational interview process. Must list names and titles of key informants, purpose of interviews, and when interviews will occur. Draft, refine, and finalize interview tools to be used to guide interviews. Guides should be tailored to each interview conducted and should incorporate themes/issues identified in review of Health Department's clinical and laboratory structures. Plan for at least 1 round of revisions based on project team feedback.</p>	<p>Within 3 months of project start date</p>
	<p>Deliverable 3: Outline/table of contents for written assessment and evaluation report</p>	<p>Written outline of the contents of the assessment and evaluation report including all key components which may include: theoretical approach to the assessment and methods; NYC Health Department's array of clinical and lab services, workflows, staffing levels, organizational structures, technological systems, equipment and supplies, budget, and revenue/sources of support; characteristics of clinic patients and communities surrounding clinics; analysis of NYC Health Department's role within the city's healthcare delivery system; root cause analyses of barriers and challenges to achieving desired future state.</p>	<p>Within 2 months of project start date</p>
	<p>Deliverable 4: Written report assessing and evaluating current state of Health Department clinics</p>	<p>Comprehensive report detailing all key components from the outline and evaluating how the clinics are meeting the needs of NYC's most vulnerable and the gaps that the clinics may potentially fill within NYC's healthcare system.</p>	<p>Within 4 months of project start date</p>

	Deliverable 5: Presentation of assessment findings	Deliver a presentation to the Health Department project team summarizing findings from assessment and evaluation. Facilitate a discussion of findings in order to guide subsequent deliverables.	Within 4 months of project start date
Research and synthesize evidenced informed standards for clinical/laboratory operations and sustainability models, with an emphasis on FQHCs and government operated health centers	Deliverable 6: Written report synthesizing industry standards	Comprehensive report detailing standards for operating and sustaining clinical and laboratory services, including references and citations.	Within 6 months of project start date
	Deliverable 7: Presentation of report findings	Deliver a presentation to the Health Department project team summarizing the research and key findings.	Within 6 months of project start date
Develop a comprehensive strategic plan to make clinical and integrated lab services sustainable long-term	Deliverable 8: Strategic plan kick off meeting	Schedule and facilitate a meeting with Health Department project team to review/revise project goals and objectives (with an emphasis on racial equity) and desired future state as well as plan content.	Within 6 months of project start date
	Deliverable 9: Outline/table of contents for strategic plan	Written outline of the contents of the strategic plan including all key components which may include: gaps between the current state and future state; investment required to achieve the future state; site-level clinical and laboratory services to be offered under the future state; site-level staffing and organizational structures under the future state; site-level equipment, supplies, and policies and procedures for inventory management; site level budgets and recommended sources of funding and revenue; policies and procedures for obtaining reimbursement for services provided to both insured and uninsured patients; policies and procedures for public health emergency responses; information technology systems enhancements required.	Within 6 months of project start date

	Deliverable 10: Presentation of preliminary recommendations about clinic services by site	Deliver a presentation to the Health Department project team summarizing preliminary findings about gaps between the current state and future state and recommendations for site-level clinical and laboratory services and elicit feedback to refine recommendations for final strategic plan.	Within 8 months of project start date
	Deliverable 11: Presentation on recommendations to build scalability into clinic system	Deliver a presentation to the Health Department project team summarizing preliminary recommendations for pivoting and scaling services for public health emergency responses.	Within 8 months of project start date
	Deliverable 12: Written draft of strategic plan	Comprehensive draft of the strategic plan including steps for implementing and sustaining clinical and laboratory services. There may be more than one round of revisions on the draft of the plan.	Within 10 months of project start date
	Deliverable 13: Final written strategic plan	Comprehensive plan detailing all key components from the outline.	Within 12 months of project start date
	Deliverable 14: Presentation of plan findings	Deliver a presentation to the Health Department project team summarizing the plan.	Within 12 months of project start date
Provide ad hoc consultation services for clinical and related services	Deliverable 15: Consultation services for Disease Control leadership	As requested, support Disease Control leadership in decision making about clinic services. Not to exceed 50 hours.	Throughout contract period

D. Additional Obligations

In addition to the deliverables outlined above, the selected consultant will be required to:

- Name a dedicated project lead who will serve as the main point of contact for NYC Health Department. The project lead should be a senior-level manager responsible for day-to-day management of the project and have extensive, documented strategic planning and project management experience as well as expertise in the ambulatory care setting, with an emphasis on NYC.
- Have information systems in place to meet expectations and carry out the proposed project deliverables (e.g. telecommunications, file management, videoconferencing [MS Teams and/or Zoom], etc.).
- Participate in regular check-in calls with the Health Department team to provide programmatic updates, review project progress, and identify any challenges and/or needs of the project.
- Provide proof of required insurance coverage (details on insurance requirements can be found in Section V).
- Submit monthly invoices along with all required supporting documentation.

Section III: Completing the Proposal

Instructions: The items contained in this section must be included in the Applicant’s proposal to meet the minimum requirements for evaluation. The sections must be in the order described and written in a straightforward and concise manner. Proposals will be evaluated based on their content, not length.

To be considered for an award, Applicants must submit their completed proposal by **Friday, March 17, 2023, at 11:59 p.m. EDT**. All proposals must be submitted via email to procurement@fphnyc.org.

A. Proposal Format Requirements

- Font: 12 point – Times New Roman
- Spacing: Single
- Pages: No more than 10 pages, numbered (exclusive of title page, table of contents, and example documents)
- Margins: 1 inch
- Paper: 8 ½ x 11
- File Format: PDF
- Label the beginning of each section as indicated (e.g., “Project approach”) and include each question number and letter.

B. Content of Proposal

Proposals shall include, at a minimum, the following information in the order provided below:

1. Applicant Signature Form (Attachment A)

2. Project Personnel Form (Attachment B)

Please note: A separate form must be filled out for each staff member who will work on this project

3. IRS Form W-9

4. Proposal Narrative

A. Organizational capacity

1. Provide evidence of meeting the minimum qualifications in Section I.B “Applicant Eligibility.” For each of the following criteria, list the Applicant’s relevant experience including client name, description of the project, project budget, and project start and end dates:
 - a) A minimum of five (5) years’ experience in strategic planning for healthcare organizations.
 - b) A minimum of five (5) years’ experience improving public health and ambulatory care clinical operations, preferably at federally qualified health centers (FQHCs) or government operated clinics/health centers.
 - c) A minimum of five (5) years’ experience working on clinical, laboratory, and administrative processes for prevention, screening, and management of infectious diseases, including clinical guidelines, accreditation standards, reimbursement, staffing levels, etc.

- d) A minimum of three (3) years' experience working with and/or assessing the New York City healthcare delivery system.
- 2. Provide a brief overview of your organization's mission, history, and structure. Describe why your organization is well positioned to provide the services described, including the organization's capabilities, capacity, and resources.
- 3. Attach an organizational chart showing all proposed project staff and their place in the structure of the organization.
- 4. Provide a list of at least 2 references with current contact person, e-mail address and phone number. Please include a description of the nature of the services, cost, if the services were completed on time, if the services were completed within the original contract budget and if not, why.
- 5. Provide at least 2-3 examples of strategic plans, timelines, presentations, interview guides, and other materials from previous projects (*examples will not count toward the page limit*).

B. Project approach

- 1. Provide a clear and detailed explanation of how the Applicant would deliver the scope of services as outlined in Section II.B: Project Scope of Work. Submissions should specifically address how the Applicant will:
 - a) Assess the Health Department's clinical and laboratory structures, technology systems, resources, and needs, as well as clinic clients and determine gaps in services. This should include:
 - Conducting a comprehensive review of clinical and laboratory services, workflows, staffing levels, organizational structures, technological systems, equipment, supplies, and budget;
 - Conducting informational interviews across BPHC, PHL, and Disease Control to understand strengths and weaknesses of clinic sites, short and long-term goals for clinical operations, how the clinics fit within NYC Health Department's priorities;
 - Evaluate BPHC patient populations, clinic locations, and needs of the community to assess if clinics are providing needed infectious disease services, particularly for NYC's most vulnerable populations.
 - b) Research and synthesize evidenced-informed standards for clinical and laboratory operations and sustainability models, with an emphasis on FQHCs and government operated health centers.
 - c) Develop a comprehensive, evidence-informed strategic plan to make clinical and integrated lab services sustainable long-term. This should include:
 - Eliciting, drafting, and refining equity-focused goals and objectives for NYC Health Department clinical services;
 - Proposing an array of services that may be pivoted and scaled for public health emergency responses;
 - Developing clear, detailed, and goal-oriented implementation and sustainability plans according to a timeline.
 - d) Provide ad hoc consultation services for clinical and related services.

5. Budget Proposal

1. Applicants must submit a budget detailing costs necessary to accomplish the deliverables and activities outlined above in the Schedule of Deliverables.
 - a) All budgets must be submitted using the template provided (Budget Proposal Template – Attachment C) and include all proposed costs. Failure to comply with format and content requirements may result in disqualifications.
 - b) All costs must be justified in terms of activities and reasonable and necessary to accomplish the objectives of the project. Costs that are deemed unreasonable may be removed from the proposed budget.

2. Instructions to complete the budget:
 - c) For each deliverable listed in the Budget Template Workbook, Attachment C, provide a proposed cost per deliverable along with a breakdown of how the deliverable totals were calculated. The cost breakdown will include the following:
 1. PS Expenses: Provide an hourly fee for all staff positions and indicate the estimated number of hours required. The hourly rates must be fully loaded rates, and include all personnel, benefits, overhead, and indirect.
 2. OTPS Expenses: Provide all other costs including travel, materials and supplies, equipment usage, and other miscellaneous costs.

Section IV: Evaluation and Award Procedures

All proposals submitted within the stated deadline will be reviewed to determine if they meet the minimum requirements of this RFP and have responded to all necessary questions and requests. The Evaluation Committee will evaluate and rate all qualified proposals based on the Evaluation Criteria described below.

A. Evaluation Criteria

A selection committee at NYC Health Department will review proposals, interview applicants, and select one applicant for this project based on qualifications and the strength of the proposed approach. The relative weight of each section is:

CATEGORY	Scoring Criteria	WEIGHT
Staffing experience	Proposals will be scored according to the years of experience the key personnel have in strategic planning for healthcare organizations; improving public health and ambulatory care clinical operations, preferably at FQHCs or government operated clinics/health; understanding clinical and laboratory processes for prevention, screening, and management of infectious diseases, including clinical guidelines, accreditation standards, reimbursement, staffing levels, etc.; and working with and/or assessing the NYC healthcare delivery system (i.e., NYC Health Department, community-based organizations, FQHCs, NYC Health + Hospitals, etc.).	25%
Organizational capacity	Proposals will be scored according to the years of experience the organization has in strategic planning for healthcare organizations; improving public health and ambulatory care clinical operations, preferably at FQHCs or government operated clinics/health; understanding clinical and laboratory processes for prevention, screening, and management of infectious diseases, including clinical guidelines, accreditation standards, reimbursement, staffing levels, etc.; and working with and/or assessing the NYC healthcare delivery system (i.e., NYC Health Department, community-based organizations, FQHCs, NYC Health + Hospitals, etc.). Higher scores will be provided to organizations with more years of relevant experience. Scores will also be based on whether applicants provide sample materials from other projects and two references with contact information.	30%
Project approach	Proposals will be scored according to whether the applicant offers a clear, detailed, and appropriate approach to:	30%

	<ul style="list-style-type: none"> Methodically assessing the Health Department’s clinical and laboratory structures, technology systems, resources, and needs, as well as clinic clients in a way that identifies gaps in service needs and populations served. Researching and synthesizing evidenced informed standards for clinical and laboratory operations and sustainability models that are applicable to the NYC Health Department’s clinical and laboratory services. Developing a comprehensive, evidence informed strategic plan to make clinical and integrated lab services sustainable long-term. Providing ad hoc consultation while also carrying out strategic planning. 	
Cost proposal and budget	Proposals will be scored according to whether the applicant offers rates (hourly and for deliverables) that satisfactorily demonstrate value and are sufficiently justified.	15%

B. Selection Process

The selection process consists of the following steps:

1. Adherence to Mandatory Minimum Requirements

All proposals will undergo an initial administrative review for completeness. For a proposal to be evaluated, it must be responsive (i.e., include all required components) and the applicant must meet all required eligibility criteria.

2. Proposal Evaluation

All responsive proposals will be judged by a review committee consisting of NYC Health Department employees. The Committee will evaluate proposals and score Applicants according to the criteria described under Section III.B: Content of Proposal. Each proposal will be scored by 7 reviewers. All sections will be scored from 0-4 with 4 indicating that all expectations are met and 0 indicating that none of the section expectations are met.

After initial scoring, the Committee will interview select applicants to discuss their proposed approach and experience. The interview must be conducted by the team that will be working on the contract should it be awarded, including the project lead.

Applicants with an average score below 2 will not be considered for an interview or award. The Committee will select the Applicant with the best score and interview for references checks and subsequent contracting, pending satisfactory feedback.

C. Award Process

Each applicant applying will be notified in writing regarding the decision concerning their proposal. Once the selection is made, the designated recipient will enter a contract with FPHNYC. Final contract execution is contingent upon successful completion of contract negotiations and demonstrated

compliance with all requirements of FPHNYC, NYC Health Department, the City of New York, and/or any other applicable federal and state laws and policies.

Section V: General Disclosures

Right to Amend, Cancel this RFP, or Solicit a New RFP

FPHNYC may amend or cancel this RFP at any time, without any liability to FPHNYC, and/or DOHMH. FPHNYC or DOHMH may solicit new requests for information and/or proposals regarding the services addressed in this RFP at any time.

Right to Reject Proposals

DOHMH may reject any or all proposals received and may ask for further clarification or documentation. Submitted information that does not respond to all items in this RFP may be excluded from further consideration and alternative information packages may not be considered.

Insurance

Contractors will need to demonstrate that necessary insurance coverage is in place from the start of the contract.

1. Commercial General Liability: insurance to provide coverage for bodily injury and property damage, including damage to any facilities, equipment or vehicles, in limits of no less than \$1,000,000 per occurrence and \$3,000,000 aggregate;
2. Professional Liability: insurance to provide coverage for covered medical incidents, including negligent acts or omissions of Contractor or Contractor's agents, representatives, employees in the performance of professional health care or nursing services, in limits of no less than \$1,300,000 per occurrence and \$3,900,000 aggregate; OR professional liability insurance, in limits of no less than \$1,000,000 per occurrence and \$3,000,000 aggregate;
3. Employers Liability: insurance to provide coverage for the acts and omissions of Contractor's employees in limits of no less than \$1,000,000 per accident;
4. Workers' Compensation: workers' compensation and disability insurance as required by the applicable New York State law.
5. Excess Umbrella Liability: in the event that contractor's insurance policy(s) does not meet the limits stated above.

Contractor shall maintain on file with FPHNY current Certificates of Insurance for the above referenced policies, listing FPHNY and the City as Additional Insureds for General Liability policies and as Certificate Holders for all other required insurance. Contractor's insurance obligations are in addition to, separate from, its obligations to defend and indemnify the City of New York and FPHNY and their respective officials and employees as provided for elsewhere in this Agreement. The limits stated in this section are minimums; the amount available to the City and FPHNY and their respective officials and employees as additional insured, shall be the greater of such minimum limits or the maximum total insurance limits available to the Contractor under all primary and excess policies of insurance.

Proposal Costs

The Applicant will be solely responsible for any costs incurred in preparing, delivering, or presenting responses to this RFP. Applicants will not be reimbursed for any costs incurred in preparing proposals.

Fulfillment of Requirements

Request for Proposals
Strategic Planning for Sustainable Clinical Infrastructure

By submitting an information package, the Applicant acknowledges that the respondent has read and understands this RFP and can fulfill all requirements.

Submitted Information

Once submitted, responses will be the property of FPHNYC and will not be returned.