

**CITY OF NEW YORK
DEPARTMENT OF HEALTH AND MENTAL HYGIENE (DOHMH)
NEGOTIATED ACQUISITION FOR
PUBLIC HEALTH DETAILING CAMPAIGNS
PIN: 18CR003100R0X00**

**Addendum #2
June 21, 2017**

Except as otherwise stated below and by any prior or subsequent Addenda to the above-referenced solicitation, the solicitation document remains unchanged.

- I. Revisions to the solicitation document: Deletions are crossed out; new language is bolded.
 - A. Section I.7.b.1., page 6 of the solicitation document is hereby revised as follows:
 - 1) having at least one designated account representative who will work on **each this Contract, assigned campaign**, and who would serve as the Contractor's primary liaison with DOHMH. This person would work out of the greater NYC office.
 - B. Section II.B.b., page 12 of the solicitation document is hereby revised as follows:
 - b. **As part of the data collection process, during an assigned campaign Representatives will be responsible to** ~~Within two weeks after the site visit to the target campaign facilities,~~ update the Department's electronic lists, following the protocols set up by the Department for the database. Fields for confirmation and/or entry include, if known: site name, address, city, zip code, telephone number, fax number, e-mail, provider names, titles, specialty, hours of operation, estimated number of client/patient visits annually, hours of service.

- C. Section III.a., fourth bullet on page 19 of the solicitation document is hereby revised as follows:
- Two written reference letters from two different clients for whom work, as specified herein, has been performed within the past 5 years who can attest to the Bidder's experience, quality of services and capacity **to perform the services described herein.** ~~for number of samples analyzed.~~ Letters from DOHMH are not acceptable for this purpose. Written reference letters must be on the reference's letterhead and must include the following information:
 - The name of the reference;
 - The title of the individual signing the reference letter; letter must be signed in ink by the signatory;
 - The address of the reference entity;
 - The contact information for the reference (including phone number and email address); and
 - A description of the services provided to the reference. ~~, including methodologies used and number of samples tested.~~
 - Attach for each key staff position a resume and/or description of the qualifications that will be required.
- II. **Emailed Questions and Answers:** Please see Annex A for answers to questions received by the Questions Due Date of June 15, 2017.
- III. **REVISED Attachment C – Acknowledgement of Addenda form:** Please see the REVISED Attachment C contained in Annex B. Applicants are directed to sign this version of the form and submit it with their Expression of Interest.

ANNEX A
Answers to Questions Received by DOHMH

1. When must the Contractors submit their proposal in response to the RFP? **As indicated in Section I.2. (page 4) of the solicitation document, Expressions of Interest are due July 7, 2017 at 2:00 p.m.**
2. Is there a particular format we must follow for the Expression of Interest? **Applicants are advised to follow the guidelines in Section III (pages 18 – 20) in compiling their Expression of Interest.**
3. Will the Public Health Detailing Representatives be using a CRM system provided by the DOHMH (i.e. salesforce.com) or should the Contractor provide the CRM system? If the DOHMH is to provide the CRM system will the DOHMH support the Public Health Detailing Representatives use of the system such as training and ongoing technical support? **As indicated in Section II.B.d. (page 12) of the solicitation document, the Contractor would “collect campaign data using DOHMH’s data collection software, salesforce.com. DOHMH will provide Contractor with appropriate access to salesforce.com. Each representative will be given their own log in.” DOHMH will provide all necessary trainings as well as ongoing technical assistance.**
4. Can you confirm that a fully-dedicated and full-time Account Representative will be required for each of the 3 years of the contract regardless of the volume of campaigns in any given year? **See revised language in Section I of this Addendum.**
5. Will a part-time Supervisor (vs. full-time Supervisor) be required for campaigns with fewer than 10 Public Health Detailing Representatives? **Applicants should fully explain their proposed approach to staffing a campaign in their Expression of Interest; that approach will be evaluated in accordance with the scope of work expectations that are outlined in the solicitation document.**
6. Will the Contractor be required to validate the DOHMH’s list of providers in advance of the start of the campaign, OR within two weeks of the start of the campaign? **Validation will not be required in advance of a campaign. See the revision to Section II.B.b. in Section I of this Addendum for a change to the language concerning when validation would occur.**
7. Should all costs be included in the hourly cost for Representatives or Supervisor including costs for training facilities, meals during training, training binder printing and assembly, business cards, secure computer, etc.? **DOHMH will provide training facilities, training binders, printing and assembly and business cards. As indicated in**

Note #1 on Attachment B, the hourly rates for the job titles are to be “fully burdened,” and include all costs associated with the performance of work.

8. Will Contractors be given the opportunity to request changes to Appendix A – General Provisions Governing Contracts For Consultants, Professional, Technical and Client Services? If so, in what format should requested changes be provided? **Changes to Appendix A are rarely approved. Applicants may indicate requested changes in their Expression of Interest, but there is no guarantee that an applicant who is recommended for contract award will have such changes approved during the contracting process.**
9. On Page 10, Section II, A. Personnel Recruitment, Selection and Management a. i. *States that the contractor will Recruit, investigate, hire, train and maintain a pool of at least 75 qualified personnel (Health Department Representatives and Supervisors) who would be called on to perform the work of this contract.* This would require a substantial capital outlay since the RFP states that there is no guarantee of the number contracts that will be granted to a Contractor in any given year. Is the maintenance of a 75 Representative and Supervisor force an annual requirement, or can this pool of employees be drawn from on an as-needed basis based on project needs? **The employees can be drawn from on an as-needed basis based on project needs.**
10. It appears to be (*sic*) hours for deployment (M-F 9 -5) for a very short term (10 to 20 weeks) up to 5 campaigns/year. Do you have plans to pay overtime, and more importantly, that the employees are not the equivalency of full time that would involve benefits. **The maximum rates that DOHMH shall reimburse the Contractor are the fully burdened hourly rates for the Representatives and Supervisors as per Attachment B. It is up to the Contractor to ensure compliance with all City, State and Federal labor rules and should calculate their proposed hourly rates accordingly.**
11. Campaigns will be 2 -35 FTEs in scope. (roster must be a minimum of 75) . Can you further explain team structure of FTE or PT? **DOHMH expects the Contractor to maintain a pool of at least 75 qualified personnel. The Contractor will develop an approach to staffing each campaign based on the unique requirements of the campaign.**
12. Please confirm pass through costs allowed, so our hourly will need to include employee benefits, equipment, admin, overhead, licensing fees for SF.com and schedule 360, vendor credentialing, telecommunications. Can you outline what would be allotted for payout for sick leave? **As indicated in Section Section II.B.d. (page 12), DOHMH will provide access to salesforce.com. All other costs must be incorporated into the fully burdened hourly rates for Representatives and Supervisors, as per Attachment B. DOHMH will not reimburse contractors for any other costs, so applicants are advised to take this into consideration when developing their hourly rate, excluding Salesforce licenses.**

13. Will you pay for training materials or should we assume? How often will they need to be crafted and how long will be given to create? **DOHMH will provide training materials and curriculum, and will coordinate with the contractor 2-3 weeks before a training start date to confirm schedule and execution.**
14. Can you confirm you will choose 2 vendors for this? **As indicated in Section I.1., page 3 of the solicitation document, DOHMH “is seeking up to two (2) qualified vendors.”**
15. Do you work in alignment of pharma guidelines? **As a government entity, DOHMH will abide by New York City guidelines.**
16. Do you have compliance people? **DOHMH staff will perform quality assurance testing of contractor staff.**
17. Can you further define deeper dive of definition (*sic*) of a call—10/day seems high. How long are interactions? Written materials, slide decks. **A detailing interaction is approximately 5-8 minutes, during which the representative asks assessment questions, presents the campaign Action Kit (these are the supporting materials) and answers questions. Representatives are trained to conduct the visit within these tight parameters. The structure is based off the pharmaceutical approach. At least 50% of the 10 contacts per day are with providers and the other 50% with clinical support staff.**
18. For profile are they requiring minimum of 2 languages? **As indicated in Section I.7.e. on page 6 of the solicitation document, the contractor “would have the capacity to coordinate PHD campaigns in English, and at minimum, the following languages: Chinese, French Creole, French, Italian, Korean, Russian, Spanish, Bengali and Arabic.”**
19. Reps responsible for access—targets 50% HCPs and community groups—treated like patient groups? **The contractor’s Representatives are responsible for gaining access to all clinical practices on DOHMH lists. At least 50% of the 10 contacts per day are with providers and the other 50% with clinical support staff.**
20. Campaigns weekends/nights? **Generally campaigns will take place during regular business hours.**
21. Number of targets – proactive and/or reactive requests? **All targets are based upon lists supplied in advance by DOHMH. At least 50% of the 10 contacts per day are with providers and the other 50% with clinical support staff**

22. There is a reference to “number of samples tested” in Section III.a page 19 - we assume that this is an unintentional error? **Yes. Please see revision in Section I of this Addendum.**
23. In Attachment B - the Price Proposal - a fully loaded hourly rate is requested.
- i) How many hours per week does the City of New York define in a typical work week? **35 work hours excluding lunch.**
 - ii) Will other staff required for the execution of this RFP (i.e. recruiting, finance, training staff) therefore need to be factored into the figures for the 2 job titles cited? **Yes. As indicated in Attachment B, the hourly rates for Representative and Supervisors are to be fully-burdened. All other staffing costs and other overhead must be included in the vendor’s proposed staffing rates.**
 - iii) the answer to ii) above appears to be yes - however on page 16 in the Campaign Protocol - there is mention made of the name, title or staff level, and billing rate for all staff to be assigned to a given Campaign - please clarify. **This only refers to “health department representatives” and “supervisors”. All other staff would be considered overhead expenses, and such expenses would be incorporated into the Representative and Supervisor hourly rates.**
24. [Salesforce.com](https://www.salesforce.com) is cited as the CRM of choice for this program - we assume that the DOHMH will be responsible for all costs of administering this platform including but not limited to configuration, licensing fees, representative training, and on-going consulting? **Correct.**
25. In Section IV, for greater clarity - by “natural break” in scores - what exactly is meant by that term? **The natural break in technical scores is typically the first point where, in descending score order, there is a wide discrepancy in the average technical scores of applicants.**
26. In Section IV - the scoring system is described as experience 30%, organizational capability 40%, and approach to scope of work 30% - however, price is mentioned as a factor as well in the following sentence. Are you able to quantify the “price” factor in any way? **The price factor will not be scored in this manner. In accordance with the Basis of Award in Section IV on page 21 of the solicitation document:**
- Awards will be made to the applicant(s) with technical scores above the natural break in score who also offer(s) the best combination of technical score and price. However:**
 - **In the event that only one applicant scores above the natural break in scores, DOHMH reserves the right to contract with only one vendor.**

- In the event that there are too few applications to determine a natural break, DOHMH reserves the right to contract with the top one or two vendors as it determines is in the best interest of the City.

ATTACHMENT C

PIN 18CR003100R0X00

ACKNOWLEDGEMENT OF ADDENDA

Directions: Complete Part I or Part II, whichever is applicable, and sign your name in Part III.

Part I

Listed below are the dates of issue for each Addendum received in connection with this Negotiated Acquisition:

Addendum # 1, Dated May 30, 2017

Addendum # 2, Dated June 21, 2017

Addendum # 3, Dated _____, 200__

Addendum # 4, Dated _____, 200__

Addendum # 5, Dated _____, 200__

Addendum # 6, Dated _____, 200__

Part II

_____ No Addendum was received in connection with this Negotiated Acquisition.

Part III

Applicant's Name: _____ Date: _____

Signature of Authorized Representative: _____