



**City Of Hammond
Purchasing Department**

**PROVIDE PRE-EMPLOYMENT, RETIREMENT PHYSICALS AND
ADDITIONAL MEDICAL SERVICES FOR THE CITY OF
HAMMOND**

RFP # 26-01

**Proposals Shall Be Received by the Purchasing Department, City of
Hammond**

**310 East Charles Street
P.O. Box 2788
Hammond, Louisiana 70404-2788
Until**

10:00 A.M. March 07, 2025

At Which Time All Proposals Will Be Opened

**Please contact Diana Guzman-McMahon - Human Resource Director at
mcmahon_dp@hammond.org or 985-277-5626 for any questions pertaining to
Specifications.**

**For Additional Information or Questions, Contact:
Jana Thurman, - Purchasing Director - (985)-277-5633 or
purchasing@hammond.org**

This is the Proposal of:

Date: _____

Company: _____

Section 3 Business/WBE/SBE/MBE/DBE: _____

Address: _____

City: _____ **State:** _____ **ZIP Code:** _____

Person to Contact: _____

Phone: _____ **Fax:** _____

Email: _____

Your Proposal is important to us.

However, should you choose NOT to submit a Proposal for this project, the City would still ask you to complete this sheet and indicate "No Proposal". This shall NOT affect your participation in future RFPs, but only serve as a means of verifying you received notification of this RFP.

Section 3 Business/WBE/SBE/MBE/DBE

The City encourages Proposals from Section 3 businesses, Woman Business Enterprises, Minority Business Enterprises, Small Business Enterprises, and other potentially Disadvantaged Business Enterprises. If your company is one of these types of businesses, please indicate "Section 3," "WBE," "SBE," "MBE," or "DBE" in the space provided above.

Nondiscrimination Requirements

By submitting and signing this Proposal, the Proposer agrees to comply with Title VI and VII of the Civil Rights Act of 1964 as amended; the Vietnam Era Veterans Readjustment Assistance Act of 1974; Section 503 of the Rehabilitation Act of 1973; Section 202 of Executive Order 11246 as amended; and the Americans with Disabilities Act of 1990.

The Proposer also agrees to keep informed of and comply with all federal, State, and local laws, ordinances, and regulations which affect.

RFP # 26-01

Specifications:

The successful vendor shall provide post-employment physicals and fitness for duty physicals to employees and/or candidates for employment, and provide the results of the physical to the City to determine a candidate's ability to safely perform the essential functions of the job. A description of the position will be provided to indicate the physical requirements and working conditions of that position for the purposes of the examination.

Types of Services

PHYSICALS
Non-Fire & Police Personnel Physicals
Police Retirement/Pre-employment Physicals
Firefighter Retirement /Pre-employment Physicals
Dot/CDL Physicals
VACCINATIONS/LABS
HEP B Injections/ per Shot
HEP B Titer
RETURN TO WORK SERVICES
New Problem return to work after sick leave
Established Problem return to work after sick leave *Monthly monitoring of sick leave as outlined in City's sick leave policy (to include Fire and Police policies and procedures)

DESCRIPTION OF SERVICES

1. **Pre-Employment Health Screening** (See attached Police Retirement Post-Employment Physical form; Fire Department Retirement Post Employment Physical form; and Non- Fire and Police Post-Employment Physical form) to include but not limited to:
 - a. Basic medical screening
 - b. Required tests under Police and Fire Retirement Post Employment Physical form
 - c. DOT/CDL Physicals
 - d. Services **may** include but are not limited to: vision, hearing, complete urinalysis, complete blood work, and complete physical (including orthopedic and review of medical history)
 - e. Drug and Alcohol Screening (to include: alcohol testing, controlled substance testing, collection site management, MRO verification, substance abuse professional services, data management, legally defensible records management, and laboratory specimen analysis).

2. **Fitness-for-Duty (Medical or/and recommendation for Psychological)** as needed for staff returning to work.
3. **Work-Related Medical Care (Worker's Compensation Medical Services)**
 - a. Medical and hospital services necessary for treatment of on-duty injuries and illness with an emphasis on a safe and prompt return to work. This would include immediate availability of emergency services as needed; inpatient and outpatient hospital, physician and nursing services, and home health care services.
 - b. Radiology, laboratory, and other ancillary services including physical therapy, occupational therapy and work hardening.
 - c. Return to work examinations, disability ratings and special evaluations.

Post-employment Physicals

At a minimum the post-employment offer physical and fitness for duty physical shall encompass:

1. Physical examination (including walk steps, vitals, dipstick urinalysis, height, weight, blood pressure, etc.)
2. Drug screen (following the federal guidelines for substance abuse testing and collections.
3. Hearing/vision testing
4. A review and consideration of the essential functions of the job the candidate is under consideration for, which shall include associated working conditions and physical requirements.
5. Issue a Medical Examiner's Certificate to the City certifying that the candidate has been medically evaluated for fitness for employment, and whether the candidate can perform the essential functions of the job.
6. Only if deemed medically necessary, by the physician, shall a chest x-ray (2 views) or an electrocardiogram be administered unless required by the Police or/and Fire Retirement.

Testing results for all types of pre-employment testing must be reported to the Director of Human Resources department **No Later than 24 hours** following the time the actual specimen was collected.

Types of Testing for Alcohol and Drugs

The selected vendor shall provide services such as a Medical Review Officer for Drug Testing for City of Hammond employees in strict accordance with state and federal guidelines. All records will be kept confidential at the doctor's office. Negative and Positive Drug Tests will be retained according to State and Federal guidelines.

1. **Pre-employment and Pre-assignment Testing**. Satisfactory completion of drug testing is a pre-employment requirement for all applicants. The testing for drugs must be completed and a report which is negative for the use drugs must be received before the person may begin to work.

2. **Reasonable Suspicion Testing.** A supervisor who determines that reasonable suspicion exists for testing may request a collaborative observation from trained personnel. When a supervisor orders reasonable suspicion testing, he or she should arrange on-site testing through the Human Resources department. If the employee exhibits threatening behavior or becomes uncontrollable, the supervisor should request security assistance.
- a. **Alcohol.** No employee shall report to duty while under the influence of or impaired by alcohol, as shown by behavioral, speech, and performance indicators of alcohol misuse, or remain on duty after obtaining a test result showing an alcohol concentration of 0.02 or greater, nor shall the City permit the employee to perform or continue to perform the functions of his or her position. An employee shall be required to undergo alcohol testing at any time the City has reasonable suspicion to believe that the employee has violated the policy for a drug-free workplace. The City's determination must be based on specific contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the employee. The observations must be made by a trained Supervisor who makes the determination that reasonable suspicion exists. Alcohol testing is authorized only if the observations are made just preceding, during, or just after the period of the workday that the employee is required to be in compliance with the policy (including attendance).
- b. **Other Controlled Substances.** An employee shall be required to undergo controlled substance testing at any time the City has reasonable suspicion to believe that the employee has violated the policy for a drug-free workplace. The City's determination must be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the employee. The observations may include indications of the chronic and withdrawal effects of controlled substance(s).

Testing results for all types of post-employment testing must be reported to the Director of Human Resources department **No Later than 24 hours** following the time the actual specimen was collected. The testing results must be made available via a secure portal.

Work-Related Medical Care (Worker's Compensation Medical Services)

Worker's compensation services include medical and hospital services provided to Covered Persons in order to diagnose and treat work related injuries or illnesses sustained by an employee of the City. These services include but are not limited to:

1. Initial and ongoing consultations, examinations and general medical treatment for work related injuries. Beyond initial treatment the provider agrees to work closely with the contracted third party claim administrator in providing injury assessments allowing them to control and authorize further treatments or services.
2. Physical and occupational therapy services delivered at primary care location and approved by the contracted third party claim administrator.
3. Laboratory testing, x-rays and other radiology services delivered at the primary care location for the diagnosis, treatment and rehabilitation of work-related injuries and approved by the contracted third party claim administrator.
4. Medical evaluations including fit for duty, work restrictions, disability rating, etc. as a result of a work-related injury.

5. Provider will grant the City (through its third party administrator) access to all current discount arrangements including occupational or managed care organization contracts consisting of discount fee arrangements for hospitals, home care, long term care, medical specialist, diagnostic and other facilities.
6. Other services as negotiated with the successful provider.

Specific Questions

Proposers should answer each of these questions listed below as well as provide evidence of qualification and any applicable charges. Responses should be included in the proposal.

1. Tests results turnaround time? Negative? Positives? Refusals? Online portal?
2. Annual statistic reports concise, comprehensive and timely?
3. Timely notification of company changes?
4. Describe billing invoice method.
5. MRO services provided by MRO?
6. Can your organization provide stat sampling to provide quick turnaround time for cases where the City deems necessary?

Information to Provide

1. The consultant shall describe in detail its proposed plan for meeting all the requirements of the scope of service for performing the Laboratory Testing service which shall include, but not limited to:
 - a. Alcohol and Drug testing
 - b. Other laboratory testing
 - c. Confidentiality
 - d. Reports
 - e. Consultation services
 - f. Records retention
2. The description of services should address issues such as: facilities locations; hours of operation; the turn-around time the City can expect on tests; time it takes a Medical Review Officer (MRO) to issue a ruling regarding a positive test, and any other issues which you deem pertinent to providing this kind of service.
3. The consultant's detailed plan should be straightforward and limited to facts, solutions to issues, and plans of proposed action.
4. In presenting the proposed method of performance, the consultant should specifically describe and provide verification documentation of licenses and certifications relating to the requirements of this RFP, with a minimum of five (5) years of experience providing Laboratory Testing Service.
5. Vendors shall provide evidence of the following qualifications of their laboratories: a. Licensed to do business in the State of Louisiana b. Certification by the U.S. Department of Health & Human Services under the National Laboratory Certification Program (NLCP)
6. Address how follow-up care for worker compensation services will be administered.
7. State your guidelines for referral to physician specialists and intended method of monitoring.

8. Detail how your organization will transition medical records to a new provider in cases where employees are hospitalized or referred to other services.
9. Any additional services or procedures of benefit to the City not specifically required herein, which the proposer offers to provide.
10. Price schedule, which includes every element of a full compliance testing program. Pricing schedule shall be based on a per test basis or on a flat fee and shall be indicated as a flat fee.

Instructions to proposer

PROPOSERS ARE URGED TO PROMPTLY REVIEW THE REQUIREMENTS OF ALL SPECIFICATIONS AND SUBMIT QUESTIONS FOR RESOLUTION AS EARLY AS POSSIBLE DURING THE SUBMITTAL PERIOD. QUESTIONS OR CONCERNS MUST BE SUBMITTED TO THE PURCHASING MANAGER DURING THE PROPOSAL PERIOD AND SHALL BECOME PART OF YOUR PROPOSAL PACKAGE. OTHERWISE, THIS WILL BE CONSTRUED AS ACCEPTANCE BY THE PROPOSERS THAT THE INTENT OF THE SPECIFICATIONS IS CLEAR AND THAT COMPETITIVE PROPOSALS MAY BE OBTAINED AS SPECIFIED HEREIN. PROTESTS WITH REGARD TO THE SPECIFICATION DOCUMENTS SHALL NOT BE CONSIDERED AFTER PROPOSALS ARE OPENED.

RFP Packages are mailed only as a courtesy. The City of Hammond does not assume responsibility for proposers to receive RFP packages. Proposers should rely on advertisements in the local newspaper, City Website www.hammond.org, online at www.bidexpress.com or personally pick up RFP packages with specifications. Full information may be obtained, or questions answered, by contacting the Purchasing Department, Hammond City Hall Complex, 310 East Charles Street.

These specifications are written in a manner to invite open competition. Any manufacturer's names, trade names, brand names, or catalog numbers used in the specifications are for the purpose of describing and establishing general quality levels. Such references are not intended to be restrictive unless the RFP states that only the brand name will be considered for reasons of compatibility, etc.

The RFP number, Proposers name, address and RFP opening date shall be clearly printed or typed on the outside of the Proposal envelope, if mailed. Only one (1) proposal shall be accepted from each proposer. Alternates shall not be accepted unless specifically requested in the RFP specifications. Proposals can be delivered or mailed.

The method of delivery of proposals is the responsibility of the proposer. All proposals shall be received by the Purchasing Department, Hammond City Hall Complex, 310 East Charles Street Hammond, Louisiana on or before the specified RFP opening date and time. Normally, bid bonds will not be required on bids for materials, supplies, annual

contracts or small labor contracts. If a bid bond is required, it will be specifically requested on the RFP form and included in the specifications.

Proposals shall be accepted only on the RFP forms furnished by the City of Hammond Purchasing Department. Altered or incomplete proposals forms, or use of substitute forms or documents, shall render the proposal non-responsive and subject to rejection.

All proposals must be typed or written in **BLUE/BLACK INK**. Any erasures, strikeover and/or changes to prices shall be initialed by the proposer. Failure to initial shall be cause for rejection of the proposal as non-responsive.

All proposals shall be signed. Failure to do so shall cause the proposal to be rejected as non-responsive.

Where one (1) or more vendor's exact products or typical workmanship is designated as the level of quality desired or equivalent, the Purchasing Manager, after study and review, reserves the right to determine the acceptability of any equivalent offered. The decision, after study and review, shall be final and binding.

If proposing "equivalent" products, specifications, illustrative literature and any deviations shall be submitted with proposal. Representative samples shall be submitted upon request, if appropriate.

SPECIAL NOTE

Contract Term: the term of this contract shall be for the period JULY 1, 2025 through JUNE 30, 2026. At the option of the City of Hammond and acceptance by the supplier, the contract may be extended for two (2) additional twelve (12) month periods at the same price, terms and conditions. Contract not to exceed thirty-six (36) months.

Service: Service to be rendered as needed during the contract period.

Non-Delivery: In the event the successful proposer is unable to furnish and/or refuses to make delivery of materials when requested to do so, the City reserves the right to obtain materials elsewhere.

License: The successful proposer must be licensed by the State of Louisiana to perform this work and shall provide the appropriate proof before work can commence.

Liability: The Contractor shall assume the defense of and indemnify and save harmless the City and its Officers and Agents from all claims relating to work.

The Contractor shall be responsible for any and all damages or claims for damages or injuries or accidents done or caused by him or his employees, or resulting from the execution of the work, or any operations, or caused by reason of existence or location or condition of facilities or of any materials, supplies, or machinery used thereon or therein, or neglect or omission on his part, or all of the several acts or things required to be done

by them, under and by these conditions, and covenants, and agrees to hold the City harmless and indemnified for all such damages and claims for damages.

The Contractor shall indemnify and save harmless the City from and against all losses and all claims, demands, payments, suits, actions, recoveries and judgments of every nature and description made, brought or recovered against the City by reason of any act or omission of the Contractor, his agents or employees, in the execution of his work.

As a qualified proposer for the project, I have carefully examined all of the RFP Documents and have examined the conditions and specifications of the work to be done, and I hereby propose to furnish all labor, materials, equipment, tools, etc., as called for by the RFP specifications for the sums indicated below.

If a certain element is included in the base pricing please indicate:

- A. Pre-employment Physical \$ _____
- B. DOT/CDL Physicals \$ _____
- C. DHHS (SAMHSA) 9 Panel to include ETOH Fire and Police \$ _____
- D. DHHS (SAMHSA) 9 Panel Non Fire and Police \$ _____
- E. HEP B Injection \$ _____
- F. HEP B Titer \$ _____
- G. Medical Review Officer Services \$ _____
- H. Statistical Reports \$ _____
- I. Certification and Verification \$ _____
- J. New Problem return to work after sick leave \$ _____
- K. Established Problem return to work after sick leave \$ _____
(Monthly monitoring of Established sick leave as outlined in City's sick leave policy to include Fire and Police policies and procedures)
- L. Please list and provide cost for services not captured above.

Signature _____ **Company** _____

The above signature on this Proposal certifies that proposer has carefully examined the instructions to proposers, terms and specifications applicable to and made a part of this Proposal Package. Proposer further certifies that the prices shown are in full compliance with the conditions, terms and specifications of this RFP.