REQUEST FOR PROPOSALS

EMERGENCY DEPARTMENT INFORMATION SYSTEM

Title of RFP: Emergency Department Information System

Date of Issuance of RFP: Tuesday, July 8 2008

Deadline for Submission of Written Proposals: Tuesday, August 5, 2008

Pre-Proposal Conference: A pre-proposal conference will be held on Wednesday, July 16, 2008, at 2:00 p.m., in the Emergency Department Conference Room located on the ground floor of the Nassau University Medical Center. You may register for the conference by sending an e-mail to the contact person listed below.

Contact Office: Antonio Napolitano, M.D., FACEP
Director of Clinical Operations
Department of Emergency Medicine
Nassau Health Care Corporation
2201 Hempstead Turnpike
East Meadow, New York 11554
Tel: 516 572-0113
E-mail: anapolit@numc.edu
SCHEDULE A:

DESCRIPTION OF SERVICES SOUGHT
AND ADDITIONAL CRITERIA

Please read the full text of the Request for Proposals to which this Schedule is attached for important information concerning the terms of this Request for Proposals and additional required information.

1. Description of Services Sought

    Nassau Health Care Corporation (NHCC), a New York State public benefit corporation, seeks an experienced firm to provide an Emergency Department Information System based on the specifications provided below.

Emergency Department Information System Specifications:

A. Application Requirements
B. Security & Compliance
C. Interfaces
D. Implementation Services
E. User and Technical Training
F. Post Implementation Support
G. Technical Requirements

A. Application Requirements: Vendor software solution must provide, at a minimum, the following functionality:

1. Best Practices:
   - Pre-built best practice derived input screens.
   - Ability to modify screen template formats to deal with specific issues at NUMC.
   - Ability to modify system to accommodate clinical pathways.

2. Patient Tracking: (on-line real-time)
   - Monitor real-time patient locations within the Emergency Department.
   - Monitor real-time status of patients within the Emergency Department.
   - On-line, real-time view of patient location and status via a GUI screen format displayable on all approved PC’s and an overhead LCD or Plasma display.
   - Specific tracking systems for different services as required: Pediatrics, Urgent Care, etc. customizable to current or enhanced workflow.

3. Triage: (on-line real-time)
   - Collection of and immediate availability of:
     - Past medical history.
     - Vital statistics.
• Major complaint.
• Current medications
• Allergies.
4. Clinical Notes: (Nursing & Physician)
   • On-line capture of clinical notes.
   • Utilization of drop-down lists, radio buttons, etc for primary notation of findings.
   • Availability of text entry in addition to the above.
   • Screen formats that replicate currently used or newly customized forms.
5. Discharge Instructions:
   • Detailed instructions.
   • Prescriptions.
   • Multiple languages based upon primary language collected via registration or triage.
6. Risk Management:
   • Recommendations on care based upon diagnosis coding.
   • Customizable for standards of care based upon diagnosis coding.
   • Alerts generation to include but not limited to:
     o Notification of exam and vitals repeat as necessary.
     o Pertinent negatives.
     o Drug to drug interaction alerts.
     o Drug to allergy interaction alerts.
     o Abnormal vital sign alerts.
     o Critical lab values.
   • Automatic retrieval of previous history, home medications, etc.
   • Prescription writer.
7. Coding and Billing:
   • Calculate codes based on CMS algorithms:
     • System recommended physician codes.
     • System recommended facility codes.
     • Appropriate codes based on services rendered automatically populate charging sheets.
     • Utilization and provision of ICD-9 codes.
     • Utilization and provision of CPT4 codes.
8. Reporting Capabilities:
   • All data elements to be stored as discrete fields in appropriate data bases.
   • Data dictionary.
   • On-line report generator.
   • Standard reports to include but not limited to:
     o Clinical reports.
     o Timed duration activity reports.
     o Productivity reporting.
     o Core measurement reporting.
   • Auto fax capability, for notification of PCP.
9. Other technologies: (Compatibility)
   • RFID patient location.
   • Biometric user logon.
• Handheld (PDA) test result notification.
• Cardiac monitor interfaces.

B. Security & Compliance: Vendor software must provide the following:

1. Provide ability to perform user authentication via NUMC’s active directory.
2. Provide application specific authentication.
3. Provide the option of biometric authentication.
4. Full compliance with:
   • JCAHO
   • NYS DOH
   • Local DOH
   • Other federal
5. Customizable application security:
   • Customizable User ID attributes.
   • Customizable auto logoff elapsed idle time.
   • Customizable password expiration time frames.
   • Customizable password configuration attributes. (Length, special character requirements, etc.)
6. Full compliance with HIPAA Privacy and Security regulations:
   • Provide a system activity log reflecting all system access including but not limited to:
     • Activity to be monitored:
       o Date entered
       o Data modified
       o Data deleted
       o Data viewed
     • Data to be stored:
       o Type of access (See above.)
       o Patient ID
       o Date of Service
       o Date/Time of access
       o Data elements / tables accessed
       o User IDs.

C. Interfaces: Vendor must be able to provide interface services as follows:

1. Ability to process inbound ADT HL/7 transactions.
2. Ability to electronically capture required data elements from NUMC’s currently installed base of patient access, clinical and ancillary support systems utilizing on-line, real time standard code set, HL/7 transactions.
3. System to system interfaces must be provided:
   • Patient Access.
   • Laboratory Sunquest (formerly MISYS)
• Ability to issue orders to currently clinical system. (Eclipsys SCM)
• Ability to accept results interface from clinical system. (Eclipsys SCM)
• Ability to link to Amicas PACS.
• Ability to store clinical information for long term retrieval.
• Ability to interface with document imaging systems.

4. Specific configuration table interfaces.
   • Physician master file inbound table update.
   • Location description table updates.

D. **Implementation Services**: Vendor to provide, at a minimum, the following implementation services in conjunction with NUMC staff, including anticipated division of responsibilities:

1. Assign an Account Manager to oversee the project.
2. Project Planning.
3. Infrastructure analysis.
4. Analysis and configuration of system-to-system HL/7 interfaces.
5. Application configuration.
6. Application configuration knowledge transfer.
7. Application testing.
8. Application installation and roll-out.
9. Go-live support on-site as required.
10. Customization of reports.
11. Customization of screen formats.
12. Customization of process flow.

E. **User Training**: Vendor to provide, at a minimum, the following user training:

1. A complete set of application user and technical configuration documentation in electronic format.
2. Support either train-the-trainer or full end-user training approaches.
3. Super-User training
4. Comprehensive end-user training for all new major features and enhancement releases.
5. Systems administration training as appropriate.

F. **Post Implementation Support**: Vendor to provide, at a minimum, the following post implementation support:

1. End-user training on new major releases or functionality enhancements.
2. 24 X 7 Help Desk support.
   • 800 number supplied for support access
• Ability to accept issues via multiple mediums.
  o Phone
  o Fax
  o E-mail
• Issue Triage
  o Based upon criticality
  o Issues posted to be responded to within 30 minutes
  o Critical issues to be corrected within 24 hours of notification by customer
• Provision for feedback to client.
• Recommendation of temporary work around to maintain continuity
• Notification of issue resolution.

G. Technical Requirements: Vendor to meet the following technical requirements and provide complete specifications for all hardware, software, third party products, and proprietary items:

1. Multi level user authentication.
2. End-user devices running:
   • Windows XP Pro
   • SQL database Client Version
3. Server Hardware:
   • Microsoft server SP(latest)
   • SQL database
4. Report Writer:
   • 1.1 + .NET framework Westguard protocol
5. Compatibility with NUMC’s current network and firewall. (Details to be provided)
6. Support TCP/IP and Ethernet 10/100/1000

2. Additional Selection Criteria

   In addition to the general Selection Criteria, Proposers’ references and prior project outcomes at other facilities, including the timelines of completion and of achievement of improvements, will be critical factors in the selection process. Proposers should provide detailed information about the cost, timeliness and financial outcomes on a range of prior projects. NHCC will be particularly interested in proposals in which the proposed compensation is based on performance and positive results from implementation of the Proposer’s recommendations.
NASSAU HEALTH CARE CORPORATION

REQUEST FOR PROPOSALS

I. Introduction

The Nassau Health Care Corporation (“NHCC”), a New York State public benefit corporation created by the Public Authorities Law of the State of New York, is a 1,120-bed health care system. NHCC operates the Nassau University Medical Center, a 530-bed tertiary care teaching hospital (“NUMC”); the A. Holly Patterson Extended Care Facility, an 589-bed skilled nursing facility; and six Diagnostic and Treatment Centers (the “Community Health Centers” or “CHCs”). NHCC is affiliated with the North Shore-Long Island Jewish Health System and the Health Sciences Center of the State University of New York at Stony Brook and maintains a strong commitment to the education of healthcare providers. NHCC has a proud tradition of service and caring to the people of Long Island, and particularly the Nassau County community. Today, its staff of over 3300 treats more than 72,000 persons annually in its Emergency Department, 23,000 in-patients, 2,000 deliveries, and more than 200,000 patient visits in over 85 specialized clinics.

NHCC is requesting proposals for the services described in Schedule A of this Request for Proposals (“RFP”). The deadline for submission of Proposals is set forth in Schedule A. Proposals shall be prepared and submitted as outlined below; proposals that do not conform to these requirements may be disqualified.

II. Process To Be Followed

This RFP is available to interested parties through the NHCC office designated in Schedule A. It may also be downloaded by clicking on the “Procurement” link found on the NHCC website at www.numc.edu. All requests for information concerning this RFP should be directed to the contact office designated in Schedule A in writing by the due date for information requests specified in Schedule A, or if no date is specified, SEVEN (7) business days prior to the due date for proposals.

Proposers must submit **ONE ORIGINAL, THREE (3) COPIES, and ONE COPY ON CD** of their proposals by 3:00 p.m. on the Due Date specified in Schedule A. Electronic or facsimile proposals will not be accepted.

Each written proposal must include the forms attached in Appendix A to this RFP. Each Proposer shall be notified whether it has been selected following completion of NHCC’s evaluation of proposals received. The selected Proposer will then enter into negotiations with NHCC regarding the specific terms of an appropriate agreement. If agreement cannot be reached within a reasonable time, NHCC may reject that Proposer and commence negotiations with one or more other Proposers.

Proposals are to be prepared in such a way as to provide a straightforward, concise description of capabilities to satisfy the requirements of this RFP. Expensive bindings, colored
displays, promotional materials, etc., are neither necessary nor desired. Emphasis should be concentrated on conformance to the RFP instructions, responsiveness to the RFP requirements, and on completeness and clarity of content.

III. **Contents of Proposals**

Please limit proposals to the following information only. Provide the same information in each section for any sub-consultants proposed:

A. Name of the Proposer.

B. Contact person for the Proposer, including name, address, phone and fax numbers, e-mail address and other contact information.

C. Proposer Background, including:

1. Brief history of your Firm and a description of all services your Firm provides.

2. A summary description of its organizational structure (e.g., corporation, partnership, LLC, etc.), its history (including information on the date of its formation and the State of its formation), its management and ownership structure (including the name and address of its officers, and of each person, directly or indirectly holding a five percent (5%) or greater ownership interest in the Proposer.

3. A description of the Proposer’s existing business operations, including number of employees by discipline.

4. Proposals must demonstrate the qualifications and experience of the Proposer specifically related to the services contemplated by this RFP.

5. Proposer’s financial information. This information is needed to ensure that each Proposer will be capable of performing its obligations under any agreement entered into between the Proposer and NHCC. Demonstration of the applicant’s financial soundness may be established by submitting the following information:

   a. A copy of the Proposer’s most recent annual audited financial statement and annual audited financial statements for the previous two years.

   b. Copies of the Proposer’s subsequent quarterly financial reports.
c. Detailed information of any changes in the mode of conducting the Proposer’s business, including bankruptcy proceedings or filings, and mergers or acquisitions within the past 3 years.

d. List of any bankruptcy proceedings in the past ten years initiated by or against the Proposer or any affiliate or related company.

6. At least three business references (including names of individuals, their titles, organizations, mailing addresses, telephone and fax numbers, and e-mail addresses).

7. A Proposer that is a licensed health care provider or other licensed entity must include information concerning any material negative findings, sanctions imposed or pending regulatory or legal proceedings.

8. Proposals must include the following:

   a. List of any and all criminal convictions within the last ten years rendered against the Proposer, any officer or director thereof, or any affiliate or related company and its officers and directors.

   b. List of any and all civil penalties, judgments, consent decrees, violations, Statements of Deficiency or other sanctions within the last ten years rendered against the applicant, any officer or director thereof, or any affiliate or related company and its officers and directors.

   c. List of any and all current investigations, indictments or pending litigation by any Federal, State or local jurisdiction initiated against the applicant, any officer or director thereof, or any affiliate or related company and its officers and directors.

   d. List of any and all actions occurring with the last ten years which have resulted in revocation or suspension of any permit or authority to do business in any Federal, State, or local jurisdiction, by the applicant, any officer or director thereof, or any affiliate or related company and its officers and directors.

   e. List of any and all actions occurring in the past ten years that have resulted in the barring from public proposal submission of the applicant, any officer or director thereof, or any affiliate or related company and its officers and directors.

D. Qualifications of Proposer to carry out this specific project or to provide these services, including a list of comparable projects and identification of individuals (including their names, titles, organizations, mailing addresses, telephone, fax numbers, and e-mail addresses) who may be contacted with respect to each comparable project.
1. Provide adequate information demonstrating experience on projects of similar scope and magnitude. Project start/completion dates and owner/client reference must be included.

2. List all projects your Firm has completed or is in progress for the past 18 months. Give a brief description of each project, including owner, size of facility, type of work performed, and size of project and completion date.

3. List the five similar projects your Firm has completed (or is in progress). Give a brief description of each project; include the size of the facility, owner and owner contact to be used for reference purposes. Also include project start and completion (proposed) date.

E. The qualifications and experience of Proposer’s staff and management for the project, including any proposed sub-contractors.

1. List the professional and support positions and number or personnel in each position. Provide resumes for all key staff and subcontractors (resumes must be no longer than two pages per individual).

2. Provide an organizational chart that includes all personnel who will be committed to this engagement. Provide specific information as to their experience on engagements similar to this one. For the project manager identified as part of the project team, provide the name and contact information of three clients with whom that person has worked on a similar building project.

3. List professional consultants outside your Firm you propose to provide services not available from your Firm. Provide specific information documenting their work on similar projects.

F. Project Approach/Team

1. Indicate the structure of your project team as well as the possible structure of NHCC’s project team. Describe the services that will be performed by your Firm and any sub-consultant.

2. Describe the deliverables for each phase of the project as you have outlined, include sample deliverables where possible.

3. Comment on your Firm’s ability to commence and complete this project. Indicate the anticipated duration of this project from time of award, including milestone dates.

4. Indicate how your Firm will manage and integrate the efforts of sub-consultants.
5. Include a list (if applicable) of projects completed with proposed sub-consultants.

6. List the members of the specific project team proposed by you; describe the role of each member; indicate number of years of relevant experience. Provide a brief resume of each team member. Only include team members proposed and available for this project.

G. Scope of proposed services, including work plan and methodology.

H. As an attachment, please provide work samples produced by members of the Firm’s team developed for specific projects related to the size, scope and magnitude of this assignment.

I. Proposed Fee

1. For each task, as you have outlined, list each discipline that will be utilized, man hours estimated to complete each task, and the hourly billable rate that NHCC will be charged including any and all multipliers. Indicate the proposed costs by phase and total costs anticipated to complete this project. Include the same information for any sub-consultants in each phase.

2. List all reimbursable expenses that you anticipate for this project. Include an estimate of reimbursable expenses anticipated and any multiplier to be applied to reimbursable expenses.

3. List any other costs anticipated on this project.

4. Provide a summary of all the costs described in 1 through 3 above.

5. Provide information on your billing practices, including reimbursable cost categories. Please state all fees as dollar figures, not percentages. All task amounts shall include associated meetings, progress reports and direct costs.

J. List your general liability and professional liability insurance coverage.

K. Any contingencies or conditions on the proposal.

L. Information required in Appendix A to this RFP.

IV. Confidential Information

A. The New York State “Freedom of Information Law,” Public Officers Law Article 6 permits access to government records, and may permit public access to proposals submitted in response to this RFP. To protect any portion of responses that constitutes technical, financial or other data whose public disclosure would cause substantial injury to a Proposer’s competitive position, or would constitute disclosure of a trade secret, a Proposer must designate any sections of its proposal that meet those
criteria. NHCC assumes no responsibility for disclosure of unmarked data for any purpose. NHCC will review such designations in making its determination whether disclosure is required, which determination shall be binding on the Proposer.

V. **Affirmative Action**

It is the policy of NHCC to comply with all federal, state and local laws, policies, orders, rules and regulations which prohibit unlawful discrimination because of race, creed, color, national origin, sex, sexual orientation, age, disability or marital status, and to take affirmative action in working with contracting parties to ensure that Minority and Women-owned Business Enterprises (M/WBEs), Minority Group Members and women share in the economic opportunities generated by NHCC’s participation in projects or initiative, and/or use of NHCC funds. NHCC’s non-discrimination and affirmative action policy will apply to this initiative. M/WBEs are encouraged to respond. A copy of each respondent’s equal employment opportunity policy statement and staffing plan of the anticipated workforce shall be included as part of the response to this RFP.

VI. **Procurement Law Requirements**

State Finance Law §§ 139-j and 139-k (collectively, the “Procurement Requirements”) apply to this RFP. The Procurement Requirements (1) govern permissible communications between potential respondents and NHCC with respect to this RFP during the procurement process; and (2) establish sanctions for knowing and willful violations of the provisions of the Procurement Requirements, including disqualification from eligibility for an award of any contract pursuant to this solicitation.

Compliance with the Procurement Requirements requires that (a) all communications regarding this RFP, from the issuance of this RFP through final award and approval of any resulting contract (the “Restricted Period”), be conducted only with the contact person(s) listed above; (b) the completion by respondents of the Offerer Disclosure of Prior Non-Responsibility Determinations and the Offerer’s Affirmation of Understanding of and Agreement pursuant to State Finance Law, copies of which are attached to this RFP as attachments to Appendix A, and (c) periodic updating of such forms during the term of any contract resulting from this RFP. Proposers must submit both of these forms, properly completed, as part of their proposals. The Procurement Requirements also require NHCC employees to obtain and report certain information when contacted by prospective bidders during the Restricted Period, make a determination of the responsibility of bidders and make all such information publicly available in accordance with applicable law. If a prospective bidder is found to have knowingly and willfully violated the State Finance Law provisions, that prospective bidder and its subsidiaries, related or successor entities will be determined to be a non-responsible bidder and will not be awarded any contract issued pursuant to this RFP.

A copy of the State Finance Law Sections 139-j and 139-k can be found at http://www ogs.state.ny.us/aboutogs/regulations/advisoryCouncil/StatutoryReferences.ht
All potential Respondents are solely responsible for full compliance with the Procurement Requirements.

VII. Selection Criteria

Proposals will be reviewed and evaluated on the following:

1. Completeness of the proposal in the format indicated in the RFP.

2. Your ability to provide the services as evidenced in the Firm’s current and recent experience in providing similar services for other healthcare providers, including evaluation of references supplied.

3. Qualifications and relevant experience of proposed team members and anticipated quality of the services to be provided.

4. Probable ability to complete the project in the timeframe allowed.

5. The project approach as outlined by your Firm.

6. Proposed cost and/or unit costs.

In addition to the general Selection Criteria, Proposer’s references and prior project outcomes at other similar facilities, including the timeliness of completion and of achievement of improvements, will be critical factors in the selection process. Proposers should provide detailed information about the cost, timeliness and financial outcomes on a range of prior projects.

VIII. Terms and Conditions

A. This RFP constitutes an invitation to make proposals to NHCC. Accordingly, NHCC reserves and, in its sole discretion, may exercise any or all of the following rights and options with respect to this RFP, any proposals and any related agreements, without incurring any liability to Proposers:

1. NHCC reserves the right to disqualify any and all proposals that fail to meet the requirements specified in this RFP.

2. NHCC reserves the right to determine whether to interview some or all of the Proposers, and to conduct such interviews privately.

3. NHCC reserves the right to select and enter into a contract with the Proposer whose proposal best satisfies NHCC’s overall interests.

4. Because this RFP is not a “competitive bid” process, the Proposer submitting the lowest cost proposal, or the proposal projecting the greatest financial benefit to NHCC, may not necessarily be selected. NHCC instead reserves the right to select the proposal it believes to be most beneficial to NHCC, with
financial terms not being the sole determinative factor. NHCC’s decision-making and selection process will be discretionary and will be based on a variety of factors. By submission of its proposal, each Proposer expressly understands, acknowledges and accepts that this is not a “competitive bid” process, and that NHCC is under no obligation to award a contract through competitive bidding, or at all.

5. NHCC reserves the right to waive or extend deadlines.

6. NHCC reserves the right to accept proposals in whole or part.

7. NHCC reserves the right to conduct investigations with respect to the qualifications of each Proposer, to make field investigations with respect to such proposals (including visits to the Proposer’s business offices or field operations).

8. NHCC reserves the right to request additional information from any Proposer and to rely upon any information obtained through NHCC’s own investigations.

9. NHCC reserves the right to cancel this RFP at any time whatsoever, with or without the substitution of another RFP.

10. NHCC reserves the right to supplement, amend or otherwise modify this RFP.

11. NHCC reserves the right to issue additional or subsequent RFPs with regard to the subject matter of this RFP.

12. NHCC reserves the right to negotiate with any Proposer, or with all or none of the Proposers. NHCC has no obligation to offer Proposers the opportunity to meet or exceed terms negotiated with a selected Proposer.

13. NHCC reserves the right to discontinue negotiations at any time and in NHCC’s sole discretion.

14. NHCC reserves the right to request new or revised proposals, including monetary terms from any Proposer at any time.

B. Preparation of a response to this RFP will be at the cost, expense and risk of the Proposer, with the express understanding and agreement of the Proposer, irrespective of whether it is selected, that it waives all claims whatsoever for reimbursement from NHCC for any cost or expense incurred in the preparation of its proposal and any subsequent contract negotiation.

C. Each and every submitting Proposer expressly understands and agrees that this RFP is not, and shall not be construed as, an offer or an enforceable contract.
D. The contract, if any that is negotiated with a selected Proposer, shall constitute the entire agreement between NHCC and the selected Proposer, and shall set forth all the terms and conditions applicable to the subject matter of this RFP. In the event of a conflict between this RFP and that contract, that contract shall control.

E. No Proposer who has submitted a proposal to NHCC shall have the right to assign its submitted proposal to a third party or the right to enter into an agreement with third parties to perform the services on Proposer’s behalf without the prior written consent of NHCC, which consent may be withheld in NHCC's sole discretion.

F. This RFP shall be construed in accordance with and governed by the laws of the State of New York, without regard to conflicts of law principles. All actions or proceedings relating, directly or indirectly, to this RFP shall be litigated only in courts located within Nassau County or in the United States District Court for the Eastern District of New York. Each Proposer (by virtue of the submission of its proposal), submits itself, its successors and/or assigns (if any) to the personal jurisdiction of such court, and waives any right to trial by jury.

G. This proposal shall be signed by an official authorized to bind the Firm, and shall contain a statement to the effect that the proposal is a Firm offer for a one hundred and eighty (180) day (or more) period. The proposal shall also provide the name, title, address, and telephone number of the individual(s) with authority to negotiate and contractually bind the company, and who also may be contacted during the period of contract.

H. Proposals submitted become the property of NHCC. By submitting a proposal, the Firm agrees not to make any claims for or have any right to damages because of any misunderstanding, misrepresentation or lack of information.

I. Ownership of Work Product - Ownership of any work developed under this order, and all right title and interest therein shall vest in NHCC. This includes any and all data sets and computer programs created for this analysis including any enhancements to existing data sets provided by NHCC. This includes any and all work materials, draft plans, preliminary analyses, and all other work materials created by the contractor for this contract. In order to effectuate the foregoing, it is expressly understood and acknowledged that the work shall be deemed to be a work made for hire under the U.S. copyright laws. In the event that the work is determined by a court or competent jurisdiction not to be a work made for hire under the U.S. copyright laws, this agreement shall operate as an irrevocable assignment by the successful bidder/vendor to NHCC of the copyright in the work, including all right, title and interest in perpetuity.
APPENDIX A

REQUIRED DISCLOSURE OF INFORMATION: THE FORMS SET FORTH BELOW MUST BE FULLY COMPLETED AND RETURNED WITH A RESPONDING FIRM'S SUBMISSION. A SUBMISSION WILL NOT BE CONSIDERED COMPLETE WITHOUT SUBMISSION OF THIS ATTACHMENT.

Offerer’s Affirmation of Understanding and Agreement

Instructions:

NHCC must obtain the required affirmation of understanding and agreement to comply with procedures on procurement lobbying restrictions regarding permissible Contacts in the Restricted Period for a procurement contract in accordance with State Finance Law §§ 139-j and 139-k.

Offerer affirms that it understands and agrees to comply with the procedures of NHCC relative to permissible Contacts as required by State Finance Law §§ 139-j (3) and 139-j (6)(b).

By: ___________________________                  Date: ______________________

Name: ___________________________

Title: _____________________________

Contractor Name: _____________________________________________________

Contractor Address: ____________________________________________________
_____________________________________________________________________
_____________________________________________________________________
Offerer Disclosure of Prior Non-Responsibility Determinations

Background:

Under New York State Finance Law § 139-k (2), covered governmental entities are obligated to obtain specific information regarding prior non-responsibility determinations. In accordance with State Finance Law §139-k, an Offerer must be asked to disclose whether there has been a finding of non-responsibility made within the previous four (4) years by a Governmental Entity due to: (a) a violation of State Finance Law §139-j or (b) the intentional provision of false or incomplete information to a Governmental Entity. The terms “Offerer” and “Governmental Entity” are defined in State Finance Law §139-k (1). State Finance Law §139-j sets forth detailed requirements about the restriction on Contacts during the procurement process. A violation of State Finance Law §139-j includes, but is not limited to, an impermissible Contact during the restricted period (for example, contacting a person or entity other than the designated contact person, when such Contact does not fall within one of the exemptions).

As part of its responsibility determinations, a covered governmental entity must consider whether an Offerer fails to timely disclose accurate or complete information regarding the above non-responsibility determination. In accordance with law, no Procurement Contract shall be awarded to any Offerer that fails to timely disclose accurate or complete information under this section, unless a finding is made that the award of the Procurement Contract to the Offerer is necessary to protect public property or public health safety, and that the Offerer is the only source capable of supplying the required Article of Procurement within the necessary timeframe.

Instructions:

A Governmental Entity must include a disclosure request regarding prior non-responsibility determinations in its solicitation of proposals or bid documents or specifications or contract documents, as applicable, for procurement contracts. The attached form is to be completed and submitted by the individual or entity seeking to enter into a Procurement Contract.
Disclosure of Prior Non-Responsibility Determinations Form

Name of Individual or Entity Seeking to Enter into Procurement Contract:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Address: ______________________________________________________________________
_____________________________________________________________________________

Name and Title of Person Submitting this Form: ______________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Contract Procurement Number: ____________________________________________________

Date: _________________________________________________________________________

1. Has any Governmental Entity made a finding of non-responsibility regarding the individual or entity seeking to enter into the Procurement Contract in the previous four years? (Please Circle):   No  Yes

   If yes, please answer the next questions:

2. Was the basis for the finding of non-responsibility due to a violation of State Finance Law §139-j? (Please Circle):  No  Yes

3. Was the basis for the finding of non-responsibility due to the intentional provision of false or incomplete information to a Governmental Entity? (Please Circle):   No  Yes

4. If you answered ‘yes’ to any of the above questions, please provide details regarding the finding of non-responsibility below:

   Governmental entity: _______________________________________________________
   Date of Finding of Non-Responsibility: ___________________________________________________________________
   Basis of Finding of Non-Responsibility: ___________________________________________________________________
   _____________________________________________________________________________
   _____________________________________________________________________________
   _____________________________________________________________________________

   (Add additional pages as necessary)
5. Has any Governmental Entity or other governmental agency terminated or withheld a
Procurement Contract with the above-named individual or entity due to the intentional provision
of false or incomplete information? (Please circle)  No  Yes

6. If yes, please provide details below.

Governmental Entity: _______________________________________________________

Date of Termination or Withholding of Contract: _________________________________

Basis of Termination or Withholding: __________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

(add additional pages as necessary)

Offerer certifies that all information provided to the Governmental Entity with respect to State
Finance Law §139-k is complete, true and accurate.

By: ______________________________  Date: _______________________

Name: ____________________________

Title: _____________________________