REQUEST FOR RESPONSE

**Purchasing Department:** Public Employee Retirement Administration Commission

**Address:** 5 Middlesex Ave., Suite 304, Somerville, MA 02145

**Telephone:** 617-666-4446, Ext. 953

**RFR Title:** Medical Evaluation Services

**RFR Number:** PER 2018-01

**Procurement Contact:** Jane Carritte, Nurse Case Manager

**RFR Release Date:** March 1, 2018
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Purpose of Procurement</td>
<td>3</td>
</tr>
<tr>
<td>II. Scope of Service</td>
<td>4</td>
</tr>
<tr>
<td>III. Acquisition</td>
<td>7</td>
</tr>
<tr>
<td>IV. Contract Specifications</td>
<td>8</td>
</tr>
<tr>
<td>V. Definitions</td>
<td>17</td>
</tr>
<tr>
<td>VI. RFR Submission Instructions</td>
<td>18</td>
</tr>
<tr>
<td>VII. Medical Fee Schedule</td>
<td>20</td>
</tr>
</tbody>
</table>
I. PURPOSE OF PROCUREMENT

Pursuant to M.G.L. c. 32, s. 8, any member retired for accidental or ordinary disability is required to participate in an evaluation to determine whether he/she is able to perform the essential duties of the position from which he/she retired, or a similar job within the same department for which he/she is qualified, or whether the member's return to his/her position from which he/she retired or a similar job is likely to be expedited by participation in a medical or vocational rehabilitation program. This process is separate and apart from medical examinations associated with the member’s application for accidental disability or ordinary disability retirement.

In accordance with this statute, PERAC schedules all Comprehensive Medical Evaluations (CME) of disabled retirees. Evaluations can take place once per year during the first two years after a member's retirement, once every three years thereafter, or upon PERAC's receipt of a written request from a disabled retiree. A retiree may be excused from a physical examination if PERAC determines that it is not warranted due to a catastrophic injury, or due to finding sufficient information within medical records submitted. However, for some retirees, PERAC may determine that a CME by a physician is necessary to complete the assessment.

A CME may include medical examinations, vocational testing, meetings, and consultations with medical professionals, including a member's treating physician and vocational rehabilitation counselor. An evaluation may also involve non-invasive medical tests such as; audiogram, pulmonary function test (PFT), functional capacity evaluation (FCE), non-invasive cardiac stress test, psychiatric evaluation, or other tests and consultations as deemed prudent by the CME physician.

The “Functional Capacity Evaluation Guide”, found in Attachment A, is a tool for the CME physician and physical therapist conducting the Functional Capacity Evaluation (FCE). It is essential that the FCE conducted on retirees (especially Municipal Police Officers, Municipal Fire Fighters, State Police Officers, and other Public Safety Employees), be job specific.

A physician who conducts a CME must prepare a written report that conforms to the PERAC format described in the attached “CME Physician Guide” (Attachment A). Physician reports must be complete, concise, and fully support his/her findings. Specificity of language, as required by Section 8 and 26 of Chapter 32, is essential.

If the CME physician finds the member able to perform the essential duties of his/her job, three additional physicians in the Restoration to Service (RTS) process will evaluate the retiree.

The physicians involved in the RTS process must certify as to the member’s ability to perform the essential duties of his/her job from which he/she retired. As with the CME physicians, the RTS examiners must consider the condition for which the member retired, as well as any other
medical conditions the member may have developed that might impact on his/her ability to perform the essential duties of the job. The CME/RTS process involves a whole body evaluation.

The RTS physicians must be unanimous in their decision for the member to be returned to service. If the three physicians certify that the member is able to return to service, the member is then put on a list and contacted by his/her employer when a position becomes available. Some time may pass before a position becomes available and the member is actually restored to service. During this period, the PERAC Nurse Case Manager will review the member’s medical status on a bi-annual basis.

As part of the bi-annual review, the member will be asked to submit a health questionnaire, as well as any new medical information that could impact on his/her ability to return to service. If new medical information is submitted suggesting a change in the member’s health status, the member will be re-evaluated by the CME physician. The CME physician will be asked to conduct a new examination and schedule the appropriate medical tests. This process is called the Restoration to Service Re-Evaluation (RTSR) process.

When the CME physician conducts the CME/RTSR for Municipal Police Officers and Municipal Fire Fighters, it is essential that the physician conducting the examination review the current Medical Standards, Essential Functions, and Physical Fitness Standards for Municipal Police Officers & Fire Fighters.

In the case of a State Trooper, the CME physician must review the current Massachusetts State Police Officers’ Medical Fitness Standards & Essential Task List, Massachusetts State Police Academy Physical Fitness Preparation Guide, and Physical Training Protocol.

II. SCOPE OF SERVICE

When conducting examinations and submitting CME reports to PERAC (both the initial CME evaluation as well as any follow up Re-Evaluations conducted after the Restoration to Service examination), the physician must:

- Review all available medical records provided by the PERAC Nurse Case Manager.
- Review job descriptions, which contain the essential duties of the job from which the member retired.
- Review the Commonwealth’s Human Resources Division’s current Medical Standards, etc., when evaluating Municipal Police Officers and Fire Fighters.
- In the case of State Troopers, the CME physician must review the current Massachusetts State Police Officers’ Medical Fitness Standards & Essential Task List, Massachusetts State Police Academy Physical Fitness Preparation Guide, and Physical Training Protocol.
- Examine the member to determine if he/she is able to perform the essential duties of the job from which he/she retired, with or without rehabilitation.
  
  If a reasonable physical rehabilitation program is likely to expedite the member’s return to his/her former position, or similar position in the same department, the physician should submit a detailed rehabilitation plan to the PERAC Case Manager identifying the
specific necessary medical services, the frequency of services, the length of time for the program, the cost of services (in keeping with the attached PERAC Medical Service Fee Schedule), and the anticipated outcome.

- Schedule all necessary pre-approved tests, unless the member is disqualified by physical examination. These test results should provide the objective documentation necessary to support your conclusions. In the case of Municipal Fire Fighters, Police Officers, State Troopers, and other public safety personnel, the following four non-invasive tests must be scheduled (unless the member is disqualified by physical examination): functional capacity evaluation (using the FCE Guide), non-invasive cardiac stress test, pulmonary function test, and audiogram.

- Be familiar with the Physical Ability Test (PAT). Both the CME physician and the physical therapist conducting the FCE for the member must be familiar with the PAT. The physical therapist conducting the FCE must modify the FCE so that it is job specific. This is especially true when evaluating public safety retirees. The FCE Guide provides information as to how the FCE should be structured.

- Invasive medical testing may not be scheduled for PERAC disabled retirees. The physician should consider other testing that may derive equivalent information.

- Consider the member’s overall health, as well as the condition for which the member is retired when rendering a final determination as to the member’s ability to perform the essential duties of his or her job.

- Order pre-approved medical consultations whenever appropriate.

- Prepare a narrative report in accordance with the PERAC format.

- Review the results of all tests and consultations, and comment on the results in your final report.

- Submit a written report, with objective medical tests and consultations, supporting the physician’s conclusions with regard to the member’s ability to perform the essential duties of his/her job, or a similar job within the same department.

- Submit a completed, signed report with invoice to PERAC.

- Refer the member to the PERAC Case Manager whenever the member requests a follow-up examination, re-examination, or additional medical tests. Only the PERAC Case Manager can approve such requests. Payment will not be rendered for any evaluations or tests conducted on the member following the physician’s final report, unless pre-approved by PERAC.

- Re-evaluate the member periodically, if necessary, prior to the member’s actual return to service (RTSR). This examination will be conducted in the same manner as the initial CME, and may include the same tests (and more, if necessary) as in the earlier evaluation.

- Be aware of the confidential nature of the member examination. The Comprehensive Medical Evaluation report is highly confidential and must not be shared with any other party.

- Understand that PERAC and the retirement boards are not covered entities under the Health Insurance Portability and Accountability Act (HIPAA). However, parties involved in the CME process who are covered under the Act must conduct business in compliance with HIPAA mandates.

- Realize that examination sites must be handicap accessible.

- Understand that, upon successful completion of PERAC’s RTS process, the PAT is scheduled for public safety disability retirees by the Commonwealth’s Human Resources Division (HRD).
Quality Assurance

The physician must meet the following standards when conducting CME and RTSR examinations, reporting to PERAC, and billing for services:

- **Time is of the essence for a member seeking a return to service**, therefore, we ask that the final report be submitted to PERAC within 30 days of completion of the member examination, medical tests, and consults.
- Complete the final report in accordance with PERAC format.
- Provide accurate reports.
- Conduct all necessary, non-invasive medical tests needed to make an objective determination as to the member’s ability to perform the essential duties of the job from which the member retired.
- **Time is of the essence for a member seeking a return to service**, therefore, we ask that a prompt response be given to any additional reports (addendum reports) you submit to PERAC. If you are asked to review and comment on additional medical information submitted by the member after the completion of the CME examination, we ask that your addendum report be submitted within 30 days of receiving the new materials.
- Use supportive language when commenting on the member’s ability to perform the essential duties of the job from which the member retired.
- Use the Commonwealth’s Human Resources Division’s current Medical Standards, etc., when evaluating municipal police officers and fire fighters.
- Provide objective evidence supporting the need for short-term rehabilitation, should rehabilitation be recommended.
- All examination sites for PERAC referrals must be handicap accessible.

PERAC has a formal Quality Assurance program. Physicians/Facility/Medical Review Organizations are visited frequently throughout the year. Prior case activities, retiree complaints, current procedures, amended materials, PERAC Medical Examination Questionnaire, Medical Evaluation Survey, etc., are reviewed with each physician and Medical Review Organization at the time of the site visit. PERAC is committed to providing the best possible medical services to public retirees.

If the Physician/Facility/Medical Review Organization reviewed by the Quality Assurance team does not meet PERAC standards, PERAC will refrain from referring cases to the physician/facility/Medical Review Organization.

All physicians conducting CME/RTSR services are reviewed by the PERAC Nurse Case Manager on a regular basis, using the Commonwealth’s website for the Board of Registration in Medicine, to determine if any disciplinary actions have been taken against PERAC physician provider.
III. ACQUISITION

Services-Fee for Service Contract (Acquisition Method)

The service contract will be awarded to those Physicians/Facilities/Medical Review Organizations that meet the conditions of the RFR and the procedures detailed in the attached CME Physician Guide and PERAC Medical Service Fee Schedule. The volume of referrals will depend on: (1) PERAC need; (2) requests made by retirees; (3) region; and (4) past performance.

CME Physicians/Facilities

The physician conducting the CME will be paid $650 for each referral. The physician fee of $650 is an all-inclusive fee (includes all administrative costs).

A maximum fee of $1,500 may be charged for the CME process. This maximum fee includes $650 paid to the physician, as well as all other medical service fees and consultations scheduled during the process. The cost of the entire evaluation shall not exceed $1,500 without written approval from PERAC.

If a clarification/addendum report is requested by PERAC of the Physician/Facility/Medical Review Organization, and the addendum/clarification report is not a correction, error, or omission in the original report, a fee of $100 will be paid to the Physician/Facility/Medical Review Organization for the clarification. These fees are evaluated annually, and are subject to amendment. Should they be amended, the Physicians/Facilities/ Medical Review Organizations will be asked to review, sign, and return the document to PERAC. The new Medical Service Fee Schedule will go into effect on the date of the signed document.

Medical Review Organizations

The Medical Review Organization will be paid $50.00 per referral. The organization will then render payment to the physician for the CME examination, all tests, and consults conducted in accordance with the PERAC Medical Service Fee Schedule. The Medical Review Organization must then provide an itemized bill to PERAC for all services. PERAC will reimburse the Medical Review Organization for approved services, as well as a vendor fee of $50.00. The Medical Review Organization is responsible for the quality and accuracy of the physician examination and reports, and will ensure that the physician complies with all PERAC policies and procedures as outlined in this document and the attachments. The Medical Review Organization fees are evaluated annually and are subject to amendment. Should they be amended, the Medical Review Organization will be asked to review, sign, and return the document to PERAC. The new Medical Service Fee Schedule will go into effect on the date of the signed document.
IV.  CONTRACT SPECIFICATIONS

Acquisition Method:  Fee for Service

Single or Multiple Contractors:  Multiple

PERAC is seeking multiple contractors to comprise a pool of physicians able and available to perform CME and RTSR reviews on certain retirees. There is no limit on the number of Physician/Facility/Medical Review Organization PERAC will contract with to fulfill this ongoing need.

Bidders are advised that acceptance and execution of a contract does not guarantee a vendor will be assigned to conduct any CME evaluations. It does not guarantee that, having conducted a review, a Physician/Facility/Medical Review Organization will be given a certain amount of reviews to complete within the life of the contract. The assignment of Physician/Facility/Medical Review Organization to conduct reviews remains the sole discretion of PERAC.

Single or Multiple Departments will be able to use:  Single

Duration of Contract (Initial Duration and Options to Renew):
   a. Initial Duration:  Five Year
   b. Renewal Options:  1 (total of ten years)

Mandatory Forms:
   • Signed Standard Contract Form
   • Signed Terms and Conditions Form
   • Completed W-9 Form
   • Authorization for Electronic Funds Transfer Form
   • Completed Contractor Authorized Signature Verification Form
   • Prompt Pay Discount Form
   • Consultant Contractor Mandatory Submission Form
   • Prosper Business Associate Agreement
   • Prosper Account Approval for Medical Vendors

Bidders:  Please refer to the OSD Forms Section of CommBuys Vendor Information Page @
www.commbuys.com
Performance and Contract Specifications

PERAC has responsibility for conducting a medical review of records for approximately 13,000 disabled retirees. A small number of these retirees will be subject to a CME. Referrals will depend on regional needs, request by the retiree, performance of the provider, and other factors as determined by PERAC. An even smaller number of retirees may be seen by the CME physician for a Re-Evaluation prior to being returned to service (RTSR-see “Description and Purpose of Procurement” and “Scope of Service” for more information). See Section VII for specific information regarding fees for medical services and reimbursements.

Physicians/Facility/Medical Review Organizations must have experienced staff as demonstrated by description of how the Physician/Facility/Medical Review Organization is able to perform the many requirements of the CME (consults, testing, etc).

Misrepresentation of any credentials will constitute sufficient cause for a Physician/Facility/Medical Review Organization to be removed from the approved list of service providers.

Procurement Calendar

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<thead>
<tr>
<th>Event</th>
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<tbody>
<tr>
<td>Release Date</td>
<td>March 1, 2018</td>
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<tr>
<td>Deadline for Responses to be reviewed:</td>
<td>March 28, 2018</td>
</tr>
<tr>
<td>Completion of Evaluation (estimated)</td>
<td>March 30, 2018</td>
</tr>
<tr>
<td>Selection/notification of Bidders (estimated)</td>
<td>April 2, 2018</td>
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<tr>
<td>Effective Date of Contract (estimated)</td>
<td>April 2, 2018</td>
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PERAC is seeking multiple Physician/Facility/Medical Review Organization to perform the services outlined in this Request for Response (RFR), therefore, we will be reviewing submissions after the initial deadline date.

Physician/Facility/Medical Review Organization must bear all costs associated with the RFR. No costs or expenses incurred by the Physician/Facility/Medical Review Organization in responding to this RFR or in participating in this solicitation will be borne by PERAC.

Notification by PERAC

PERAC will advise respondents of their acceptance or failure to qualify as prospective service providers by letter. Those Physician/Facility/Medical Review Organizations whose proposals are accepted will be mailed a copy of the signed Commonwealth of Massachusetts Standard Contract.

Bidders may submit their responses electronically using Commbuys @www.mass.gov/Commbuys.com.
Evaluation of Responses and Contract Award
If a bidder is unable to meet any of the specifications required in this RFR, the bidder’s response must include an alternative method for meeting such specification by identifying the specification, the proposed alternative and thoroughly describing how the alternative achieves substantially equivalent or better performance to the performance required in this RFR specification. PERAC will determine if a proposed alternative method of performance achieves substantially equivalent or better performance. PERAC will award the contract to the RFR response that meets the requirements for price, best value, and best interests of PERAC.

NO GUARANTEE OF PURCHASE

Addenda to RFR
If it becomes necessary to revise any part of this RFR, or if additional data is necessary to clarify any of its provisions, an addendum will be sent to all prospective Physician/Facility/Medical Review Organization and will be posted on Commbuys.

Cancellation of Solicitation
The PERAC retains the right to cancel this solicitation, or any portion thereof, at any time prior to the execution and approval of a contract. If this Solicitation is canceled, all Proposals received in response to this RFR will be rejected. All expenses related to the preparation of responses to this RFR remain the responsibility of the Physician/Facility/Medical Review Organization.

Physicians/ Facilities/Medical Review Organizations interested in conducting Comprehensive Medical Evaluations and Restoration to Service Re-Evaluations for public retirees as mandated by M.G.L. c. 32, s. 8 and s. 26

PERAC reserves the right to reject any or all Proposals, or to accept any Proposal, or to require additional information from any or all Respondents, if PERAC deems it to be in the best interest of the Commonwealth. After PERAC has awarded the contract(s), it is subject to review and approval by appropriate state agencies. Every effort will be made to expedite this approval process.
In general, most of the required contractual stipulations are referenced in the Standard Contract Form and Instructions and the Commonwealth Terms and Conditions. However, the following RFR provisions must appear in all Commonwealth competitive procurements conducted under 801 CMR 21.00.

The terms of 801 CMR 21.00: Procurement of Commodities and Services are incorporated by reference into this RFR. Words used in this RFR shall have the meanings defined in 801 CMR 21.00. Additional definitions may also be identified in this RFR. Other terms not defined elsewhere in this document may be defined in OSD’s Glossary of Terms. Unless otherwise specified in this RFR, all communications, responses, and documentation must be in English, all measurements must be provided in feet, inches, and pounds and all cost proposals or figures in U.S. currency. All responses must be submitted in accordance with the specific terms of this RFR.

COMMBUYS Market Center. COMMBUYS is the official source of information for this Bid and is publicly accessible at no charge at www.commbuys.com. Information contained in this document and in COMMBUYS, including file attachments, and information contained in the related Bid Questions and Answers (Q&A), are all components of the Bid, as referenced in COMMBUYS, and are incorporated into the Bid and any resulting contract.

Bidders are solely responsible for obtaining all information distributed for this Bid via COMMBUYS. Bid Q&A supports Bidder submission of written questions associated with a Bid and publication of official answers.

It is each Bidder’s responsibility to check COMMBUYS for:

- Any amendments, addenda or modifications to this Bid, and
- Any Bid Q&A records related to this Bid.

The Commonwealth accepts no responsibility and will provide no accommodation to Bidders who submit a Quote based on an out-of-date Bid or on information received from a source other than COMMBUYS.

COMMBUYS Registration. Bidders may elect to obtain a free COMMBUYS Seller registration which provides value-added features, including automated email notification associated with postings and modifications to COMMBUYS records. However, in order to respond to a Bid, Bidders must register and maintain an active COMMBUYS Seller account.

All Bidders submitting a Quote (previously referred to as Response) in response to this Bid (previously referred to as Solicitation) agree that, if awarded a contract: (1) they will maintain an active seller account in COMMBUYS; (2) they will, when directed to do so by the procuring entity, activate and maintain a COMMBUYS-enabled catalog using Commonwealth Commodity Codes; (3) they will comply with all requests by the procuring entity to utilize COMMBUYS for the purposes of conducting all aspects of purchasing and invoicing with the Commonwealth, as added functionality for the COMMBUYS system is activated; (4) Bidder understands and
acknowledges that all references to the Comm-PASS website or related requirements throughout this RFR, shall be superseded by comparable requirements pertaining to the COMMBUY5 website; and (6) in the event the Commonwealth adopts an alternate market center system, successful Bidders will be required to utilize such system, as directed by the procuring entity. Commonwealth Commodity Codes are based on the United Nations Standard Products and Services Code (UNSPSC).

The COMMBUY5 system introduces new terminology, which bidders must be familiar with in order to conduct business with the Commonwealth. To view this terminology and to learn more about the COMMBUY5 system, please visit the COMMBUY5 Resource Center.

**Multiple Quotes.** Bidders may not submit Multiple Quotes in response to a Bid unless the RFR authorizes them to do so. If a Bidder submits multiple quotes in response to an RFR that does not authorize multiple responses, only the latest dated quote submitted prior to the bid opening date will be evaluated.

**Quote Content.** Bid specifications for delivery, shipping, billing and payment will prevail over any proposed Bidder terms entered as part of the Quote, unless otherwise specified in the Bid.

**Supplier Diversity Program (SDP).** Massachusetts Executive Order 565 reaffirmed and expanded the Commonwealth’s policy to promote the award of state contracts in a manner that develops and strengthens certified Minority Business Enterprises (MBEs), Women Business Enterprises (WBEs), Minority and Women Nonprofit Organizations (M/WNPOs), Veteran Business Enterprises (VBEs), Service-Disabled Veteran-Owned Business Enterprises (SDVOBEs), Disability-Owned Business Enterprises (DOBEs), and Lesbian, Gay, Bisexual and Transgender Business Enterprises (LGBTBEs).

**Partnerships with M/WBEs, M/WNPOs, VBEs and SDVOBES:** All bidders are required to make a significant financial commitment to partner with certified M/WBEs, M/WNPOs, VBEs and/or SDVOBES certified or verified by the Supplier Diversity Office (SDO). Bidders must identify a commitment in the form of a specific percentage of sales made under the resulting contract that will be spent with an SDP Partner(s) on a Massachusetts fiscal year basis, using SDP Plan Form #1 – SDP Plan Commitment. This percentage commitment will extend for the life of any resulting contract.

This requirement extends to all bidders regardless of their certification status, and no bidder will be awarded a Contract unless and until the above requirement is met. Bidders may not list themselves or affiliates as SDP Partners. In order to ensure compliance with this section and encourage bidder participation, SDP Plans will be evaluated at 10% or more of the total evaluation score for all for Large Procurements (those with a total value of greater than $150,000). SDP Plan submission is encouraged but not required for Small Procurements (those with a total value equal to or less than $150,000).

Once an SDP commitment is approved, the agency will monitor the Contractor’s performance, and use the Contractor’s reported expenditures with M/WBEs, M/WNPOs, VBEs and SDVOBES to fulfill their own SDP expenditure benchmarks. The Commonwealth reserves the right to
contact SDP Partners at any time to request that they attest to the amounts reported to have been paid to them by the Contractor.

**SDP Forms:** Unless otherwise specified in the RFR, the following SDP forms are required to be submitted by the deadlines noted below in order to meet the mandatory participation requirements of the SDP:

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<th>SDP Plan Form #/Name</th>
<th>Submitted By</th>
<th>When Submitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>SDP Plan Form #1 – SDP Plan Commitment</td>
<td>All Bidders</td>
<td>With Bid Response</td>
</tr>
<tr>
<td>SDP Plan Form #2 – Declaration of SDP Partners</td>
<td>Newly Awarded Contractors</td>
<td>Within 30 days of contract execution</td>
</tr>
<tr>
<td>SDP Plan Form #3 – SDP Spending Report</td>
<td>Contractors</td>
<td>Within 45 days of the end of each quarter</td>
</tr>
</tbody>
</table>

In addition to the requirements above, all bidders must follow the requirements set forth in the Supplier Diversity Program (SDP) Plan Section of the RFR. During the life of the contract, the Commonwealth reserves the right to expand the range of certified business categories available for SDP partnerships to all those mentioned above and/or request reports on the Contractors’ spending with such certified business categories.

**Supplier Diversity Program (SDP) Resources:**

- Lists of M/WBEs, M/WNPOs, VBEs, SDVOBES, DOBES and LGBTBEs certified or verified by the Supplier Diversity Office (SDO) are located at [www.mass.gov/sdo](http://www.mass.gov/sdo).
- Resources to assist Prime Bidders in finding potential Certified Partners can be found at [www.mass.gov/sdp](http://www.mass.gov/sdp).
- The Operational Services Division offers trainings on compliance with the SDP Plan requirements. Registration information for upcoming trainings can be found on the [Supplier Diversity Program Trainings](http://www.mass.gov/sdp) webpage.

**Agricultural Products Preference (only applicable if this is a procurement for Agricultural Products)** - Chapter 123 of the Acts of 2006 directs the State Purchasing Agent to grant a preference to products of agriculture grown or produced using locally grown products. Such locally grown or produced products shall be purchased unless the price of the goods exceeds the price of products of agriculture from outside the Commonwealth by more than 10%. For purposes of this preference, products of agriculture are defined to include any agricultural, aquacultural, floricultural or horticultural commodities, the growing and harvesting of forest products, the raising of livestock, including horses, raising of domesticated animals, bees, fur-bearing animals and any forestry or lumbering operations.

**Best Value Selection and Negotiation.** The Strategic Sourcing Team or SST may select the response(s) which demonstrates the best value overall, including proposed alternatives that will achieve the procurement goals of the department. The SST and a selected bidder, or a contractor, may negotiate a change in any element of contract performance or cost identified in the original
RFR or the selected bidder’s or contractor’s response which results in lower costs or a more cost effective or better value than was presented in the selected bidder’s or contractor’s original response.

**Bidder Communication.** Bidders are prohibited from communicating directly with any employee of the procuring department or any member of the SST regarding this RFR except as specified in this RFR, and no other individual Commonwealth employee or representative is authorized to provide any information or respond to any question or inquiry concerning this RFR. Bidders may contact the contact person for this RFR in the event this RFR is incomplete or the bidder is having trouble obtaining any required attachments electronically through COMMBUYS.

**Contract Expansion.** If additional funds become available during the contract duration period, the department reserves the right to increase the maximum obligation to some or all contracts executed as a result of this RFR or to execute contracts with contractors not funded in the initial selection process, subject to available funding, satisfactory contract performance and service or commodity need.

**Costs.** Costs which are not specifically identified in the bidder’s response, and accepted by a department as part of a contract, will not be compensated under any contract awarded pursuant to this RFR. The Commonwealth will not be responsible for any costs or expenses incurred by bidders responding to this RFR.

**Electronic Communication/Update of Bidder’s/Contractor’s Contact Information.** It is the responsibility of the prospective bidder and awarded contractor to keep current on COMMBUYS the email address of the bidder’s contact person and prospective contract manager, if awarded a contract, and to monitor that email inbox for communications from the SST, including requests for clarification. The SST and the Commonwealth assume no responsibility if a prospective bidder’s/awarded contractor’s designated email address is not current, or if technical problems, including those with the prospective bidder’s/awarded contractor’s computer, network or internet service provider (ISP) cause email communications sent to/from the prospective bidder/awarded contractor and the SST to be lost or rejected by any means including email or spam filtering.

**Electronic Funds Transfer (EFT).** All bidders responding to this RFR must agree to participate in the Commonwealth Electronic Funds Transfer (EFT) program for receiving payments, unless the bidder can provide compelling proof that it would be unduly burdensome. EFT is a benefit to both contractors and the Commonwealth because it ensures fast, safe and reliable payment directly to contractors and saves both parties the cost of processing checks. Contractors are able to track and verify payments made electronically through the Comptroller’s Vendor Web system. A link to the EFT application can be found on the [OSD Forms](www.mass.gov/osd) page. Additional information about EFT is available on the [VendorWeb](www.mass.gov/osc) site. Click on MASSfinance.

Successful bidders, upon notification of contract award, will be required to enroll in EFT as a contract requirement by completing and submitting the *Authorization for Electronic Funds Payment Form* to this department for review, approval and forwarding to the Office of the Comptroller. If the bidder is already enrolled in the program, it may so indicate in its response.
Because the *Authorization for Electronic Funds Payment Form* contains banking information, this form, and all information contained on this form, shall not be considered a public record and shall not be subject to public disclosure through a public records request.

The requirement to use EFT may be waived by the SST on a case-by-case basis if participation in the program would be unduly burdensome on the bidder. If a bidder is claiming that this requirement is a hardship or unduly burdensome, the specific reason must be documented in its response. The SST will consider such requests on a case-by-case basis and communicate the findings with the bidder.

**Executive Order 509, Establishing Nutrition Standards for Food Purchased and Served by State Agencies.** Food purchased and served by state agencies must be in compliance with Executive Order 509, issued in January 2009. Under this Executive Order, all contracts resulting from procurements posted after July 1, 2009 that involve the purchase and provision of food must comply with nutrition guidelines established by the Department of Public Health (DPH). The nutrition guidelines are available at the Department’s website: [Tools and Resources for Implementation of Executive Order 509](#).

**HIPAA: Business Associate Contractual Obligations.** Bidders are notified that any department meeting the definition of a Covered Entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) will include in the RFR and resulting contract sufficient language establishing the successful bidder’s contractual obligations, if any, that the department will require in order for the department to comply with HIPAA and the privacy and security regulations promulgated thereunder (45 CFR Parts 160, 162, and 164) (the Privacy and Security Rules). For example, if the department determines that the successful bidder is a business associate performing functions or activities involving protected health information, as such terms are used in the Privacy and Security Rules, then the department will include in the RFR and resulting contract a sufficient description of business associate’s contractual obligations regarding the privacy and security of the protected health information, as listed in 45 CFR 164.314 and 164.504 (e), including, but not limited to, the bidder's obligation to: implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the protected health information (in whatever form it is maintained or used, including verbal communications); provide individuals access to their records; and strictly limit use and disclosure of the protected health information for only those purposes approved by the department. Further, the department reserves the right to add any requirement during the course of the contract that it determines it must include in the contract in order for the department to comply with the Privacy and Security Rules. Please see other sections of the RFR for any further HIPAA details, if applicable.

**Minimum Quote (Bid Response) Duration.** Bidders' quotes made in response to this Bid must remain in effect for at least 90 days from the date of quote submission.

**Prompt Payment Discounts (PPD).** All bidders responding to this procurement must agree to offer discounts through participation in the Commonwealth Prompt Payment Discount (PPD) initiative for receiving early and/or on-time payments, unless the bidder can provide compelling proof that it would be unduly burdensome. PPD benefits both contractors and the Commonwealth.
Contractors benefit by increased, usable cash flow as a result of fast and efficient payments for commodities or services rendered. Participation in the Electronic Funds Transfer initiative further maximizes the benefits with payments directed to designated accounts, thus eliminating the impact of check clearance policies and traditional mail lead time or delays. The Commonwealth benefits because contractors reduce the cost of products and services through the applied discount. Payments that are processed electronically can be tracked and verified through the Comptroller’s Vendor Web system. The PPD form can be found as an attachment for this Bid on COMMBUYS.

Bidders must submit agreeable terms for Prompt Payment Discount using the PPD form within their proposal, unless otherwise specified by the SST. The SST will review, negotiate or reject the offering as deemed in the best interest of the Commonwealth.

The requirement to use PPD offerings may be waived by the SST on a case-by-case basis if participation in the program would be unduly burdensome on the bidder. If a bidder is claiming that this requirement is a hardship or unduly burdensome, the specific reason must be documented in or attached to the PPD form.

Public Records. All responses and information submitted in response to this RFR are subject to the Massachusetts Public Records Law, M.G.L., c. 66, s. 10, and to c. 4, s. 7, ss. 26. Any statements in submitted responses that are inconsistent with these statutes, including marking by bidders of information as confidential during the quote submission process in COMMBUYS, shall be disregarded.

Reasonable Accommodation. Bidders with disabilities or hardships that seek reasonable accommodation, which may include the receipt of RFR information in an alternative format, must communicate such requests in writing to the contact person. Requests for accommodation will be addressed on a case by case basis. A bidder requesting accommodation must submit a written statement which describes the bidder’s disability and the requested accommodation to the contact person for the RFR. The SST reserves the right to reject unreasonable requests.

Restriction on the Use of the Commonwealth Seal. Bidders and contractors are not allowed to display the Commonwealth of Massachusetts Seal in their bid package or subsequent marketing materials if they are awarded a contract because use of the coat of arms and the Great Seal of the Commonwealth for advertising or commercial purposes is prohibited by law.

Subcontracting Policies. Prior approval of the department is required for any subcontracted service of the contract. Contractors are responsible for the satisfactory performance and adequate oversight of its subcontractors. Human and social service subcontractors are also required to meet the same state and federal financial and program reporting requirements and are held to the same reimbursable cost standards as contractors.
V. DEFINITIONS

For the purpose of this RFR, please note definitions for the following:

**CME Physician/Facility** – a medical care provider/entity who employs a physician(s) who conducts examinations similar to the Comprehensive Medical Evaluation (CME) described in this RFR. The provider/entity must also have the medical testing capabilities defined in this RFR. The CME physician who conducts the examination for public retirees (referred by PERAC), must do so under the conditions described in this RFR.

**Medical Review Organization** – any provider/entity who provides services to the medical community and is interested in contracting with PERAC for the purpose of outsourcing Comprehensive Medical Evaluations with appropriate CME physicians. The Medical Review Organization must meet the criteria described in this RFR for Medical Review Organizations and adhere to the conditions, follow procedures, and ensure the quality of their product. The physicians with whom they contract to conduct CMEs must also operate within the mandates of this RFR.

**Provider or Vendor** – the term provider and vendor are interchangeable for the purpose of this RFR and may describe either the CME physician/facility or the Medical Review Organization. All are providing services directly to PERAC, and all are vendors under State contract.

PERAC's objective is to contract with physicians/facilities/Medical Review Organizations who will provide Comprehensive Medical Evaluations described in the Scope of Service section of this document as mandated by G.L. c. 32, s. 8, and s. 26 PERAC regulation 840 CMR 10.00, and Disability Unit procedures.

**Subcontracting Policies** – Prior approval of PERAC is required for any subcontracted service of the contract. Contractors are responsible for the satisfactory performance and adequate oversight of its subcontractors. Subcontractors are required to meet the same state and federal financial and program reporting requirements, and are held to the same reimbursable cost standards as contractors.

PERAC therefore invites proposals for services from all interested parties. Such services shall relate to retirees of the Commonwealth of Massachusetts, and subdivisions thereof, who are receiving ordinary or accidental disability retirement benefits.

Bidders must accept the following Medical Service Fee Schedule:

- Single Physician Examination $650.00
- Medical Review Organization (fee per case) $50.00

Please review the attached PERAC Medical Service Fee Schedule. The Medical Service Fee Schedule is reviewed annually by the Commission and subject to change based on the approval of the Commission. The Physician/Facility/Medical Review Organization will be notified of any
amendments to the PERAC Medical Service Fee Schedule. If the Medical Service Fee Schedule is amended, the Physicians/Facilities/Medical Review Organizations will be asked to review, sign, and return the amended Medical Service Fee Schedule to PERAC.

VI. RFR SUBMISSION INSTRUCTIONS

The Transmittal Letter should be submitted containing a summary of the respondent's Proposal. It must be signed by a person who is authorized to contractually bind the respondent.

The Transmittal Letter must include the name, title, mailing address, and telephone number of the individual who will be responsible for the contract of services. Any requests for information, and all other communications with regard to this Proposal, will be directed to the individual so identified.

The Transmittal Letter must state that the Proposal will remain in effect for ninety (90) days from the deadline for submission of Proposals.

The Transmittal Letter must identify all materials and enclosures being submitted.

In addition, all respondents must submit:

- The name and address of legal counsel.
- A listing of the physicians employed by the facility who will be conducting evaluations and their resumés.
- Proof of malpractice/liability insurance for medical vendors (if applicable), the physician, and all physicians working for the facility who will be involved in the CME process.
- Proof of current licensure in Massachusetts.
- Most up-to-date financial information for the Medical Review Organization (if applicable), the physician, and facility. If an entity is incorporated, submit a prepared financial report or the corporation’s most recently filed Federal Tax Return. Sole Proprietors may submit a Schedule C Form in lieu of a Federal Tax Return.
- A listing of all locations providing services.
- References from three clients. Public sector experience is strongly preferred; however, PERAC will accept references from businesses and private corporations as well.
- A signed, executed Medical Service Fee Schedule (Attachment C).
- A signed, executed Disclosure Form (Attachment B).
- A record for the last five years of any judgments or settlements stemming from litigation, and any pending litigation with which the Physician/Facility/Medical Review Organization is currently faced. If a particular Physician/Facility/Medical Review Organization does not have a litigation history, the Physician/Facility/Medical Review Organization must provide a written statement to that effect.
It is **mandatory** that the RFR include the following forms:
- Request for Taxpayer Identification Number and Certification (W-9)
- Commonwealth Terms & Conditions
- Commonwealth’s Standard Contract Form and Instructions
- Authorization for Electronic Funds Transfer
- Contractor Authorized Signature Verification Form
- Prompt Pay Discount Form
- Prosper Business Associate Agreement
- Prosper Account Approval for Medical Vendors

PERAC will review the Proposals within two weeks upon receipt of prospective Physician/Facility/Medical Review Organizations responses. Those Physicians/Facility/Medical Review Organizations whose Proposals are accepted will be mailed a signed copy of the Commonwealth of Massachusetts Standard Contract and the PERAC Medical Service Fee Schedule.

PERAC will accept Proposals electronically via commubys.com or US mail. For mailing purposes, please submit all responses to:

Jane Carritte, RN Clinical Case Manager  
Public Employee Retirement Administration Commission  
5 Middlesex Ave, Suite 304  
Somerville, MA 02145

**PROCEDURAL INFORMATION**

PERAC designates certain members of its staff to act as the Review Committee to review all responses to this RFR and to recommend the successful bidder(s). PERAC will make the final selection based upon the recommendation of the Review Committee.

The Chairperson of the Review Committee is:

Jane Carritte, RN Clinical Case Manager  
Public Employee Retirement Administration Commission  
5 Middlesex Ave, Suite 304  
Somerville, MA 02145  
(617) 666-4446

**NOTICE REGARDING PUBLIC RECORDS**

All proposals received and opened by the Review Committee become public records subject to the provisions of G.L. c. 66.

**REVISION OR CLARIFICATION OF RFR**

If it becomes necessary to revise any part of this RFR, or if it becomes necessary to clarify any of the provisions of this RFR, an addendum will be provided to all Physician/Facility/Medical Review Organization who have requested a copy of this RFR.
VII. MEDICAL FEE SCHEDULE

All medical tests, medical consults, etc., must be billed at the rates listed below. Only non-invasive medical tests can be approved by the PERAC case manager.

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>PERAC APPROVED RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Physician Examination</td>
<td>$650</td>
</tr>
<tr>
<td>Medical Review Organization (fee per case)</td>
<td>$ 50</td>
</tr>
<tr>
<td>Addendum report provided by the CME MD</td>
<td>$100</td>
</tr>
</tbody>
</table>
| For completing a review of a medical sub-specialty evaluation  
Scheduled for the retiree |  
| Audiogram                                | $ 55                |
| Chest X-ray, PA & Lateral                | $ 60                |
| Spine Cerv - 2 views                     | $ 60                |
| Lumbar - 2 views                         | $ 60                |
| Thoracic - 2 views                       | $ 60                |
| Knee - 2 views                           | $ 50                |
| Ankle - 2 views                          | $ 46                |
| Electrocardiogram                        | $ 54                |
| Echocardiogram                           | $255                |
| Non-Invasive Exercise Cardiac Stress Test| $200-$325           |
| Pulmonary Function Test (PFT)            | $ 54                |
| Functional Capacity Evaluation (FCE)     | $300                |
| Psychological Testing                    | $104/hr.            
(Max. 6 hrs. - includes interpretation and report) |
| Medical Consults                         | ***                
*** As negotiated with the PERAC Case Mgr. & letter documenting agreed fee. |
| Physical therapy initial evaluation      | $100                |
| Physical therapy                         | $ 80/hr.            |
| Vocational Rehabilitation (rates consistent with those established by the Department of  
Industrial Accident-Office of Vocational and Educational Rehabilitation (OVER) |
| Occupational therapy                     | $ 80/hr.            |

Above consults are all-inclusive (including reports).
NO SHOW FEE $150
(failed to attend physician appointment with less than 2 business days’ notice)

NO SHOW FEE $ 75
(failed to attend FCE or cardiac stress test appointment (with less than 2 business days’ notice)

BILLING REQUIREMENTS

Upon receipt of a Physician/Facility/Medical Review Organization invoice PERAC will render payment to each Physician/Facility/Medical Review Organization as mandated by the Office of the Comptroller as stated in the Terms and Conditions of the Commonwealth’s Standard Contract.

- Invoicing will be generated based upon the PERAC Fee Schedule. Services must be approved by a PERAC Case Manager at the contracted fee, and the date of service must be included in the submitted report.

- Physician/Facility/Medical Review Organization who have rendered services will be reimbursed upon submission a completed report with all applicable test results to the Public Employee Retirement Administration Commission.

Signed under the pains and penalties of perjury on the ______ day of ____________, ____.

Bidder Name

______________________________
Signature of Authorized Representative signed on behalf of Bidder

______________________________
Date

______________________________
Print Name and Title of Authorized Representative
**THIS CHECK-LIST IS PROVIDED TO THE BIDDER LISTING ALL MANDATORY INFORMATION AND DOCUMENTATION TO BE SUBMITTED TO PERAC WITH YOUR RESPONSE**

1. The name, title, mailing address and telephone number of the person responsible for the contract services.
2. A list identifying all materials and enclosures being submitted.
3. All certifications required by this RFR must be completed and signed by a person who is authorized to contractually bind the respondent.
4. The name and address of legal counsel.
5. A listing of the physicians employed by the facility who will be conducting evaluations and their resumés.
6. Proof of malpractice/liability insurance for medical vendor (if applicable) and all physicians working for the facility who will be conducting PERAC CME Medical Reviews.
7. Proof of current licensure in Massachusetts for all physicians working for the facility who will be conducting PERAC CME Medical Reviews.
8. Most up-to-date financial information for the Medical Review Organization (if applicable), the physician, and facility. If an entity is incorporated, submit a prepared financial report or the corporation’s most recently filed Federal Tax Return. Sole proprietors may submit a Schedule C Form in lieu of a Federal Tax Return.
9. A listing of all locations providing services.
10. References from three clients. Public sector experience is strongly preferred, however, PERAC will accept references from businesses and private corporations as well.
11. A signed, executed Medical Service Fee Schedule (Attachment C).
12. A signed, executed Disclosure Form (Attachment B).
13. A record for the last five years of any judgments or settlements stemming from litigation, and any pending litigation with which the physician/facility/medical vendor is currently faced. If a particular physician/facility/medical vendor does not have a litigation history, the physician/facility/medical vendor must provide a written statement to that effect.
14. All Mandatory Forms
CME RFR Attachments List:

<table>
<thead>
<tr>
<th>Attachment</th>
<th>Description</th>
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<tbody>
<tr>
<td>Attachment A</td>
<td>CME Physician Guide &amp; FCE Guide</td>
</tr>
<tr>
<td>Attachment B</td>
<td>Disclosure Form</td>
</tr>
<tr>
<td>Attachment C</td>
<td>Medical Service Fee Schedule</td>
</tr>
<tr>
<td>Attachment D</td>
<td>Mandatory Commonwealth Forms</td>
</tr>
<tr>
<td></td>
<td>• Standard Commonwealth Contract and Instructions</td>
</tr>
<tr>
<td></td>
<td>• Commonwealth Terms &amp; Conditions</td>
</tr>
<tr>
<td></td>
<td>• W-9 Taxation Form</td>
</tr>
<tr>
<td></td>
<td>• Authorization for Electronic Funds Transfer (EFT)</td>
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<tr>
<td></td>
<td>• Consultant Contractor Mandatory Submission</td>
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<td>• Prosper Account Approval for Medical Vendors</td>
</tr>
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<td>Medical Standards for Municipal Fire fighters</td>
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<tr>
<td></td>
<td>Medical Standards for Municipal Police Officers</td>
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<tr>
<td></td>
<td>Medical Standards for State Police</td>
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