REQUEST FOR PROPOSAL

Sealed Envelope shall be marked with the following information:
RFP # 21-16
Occupational Medical Services
Due Date and Time: September 8, 2020, 3:00 PM

<table>
<thead>
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<th>SCHEDULE OF EVENTS FOR RFP # 21-16</th>
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<td>Pre-Proposal Conference</td>
</tr>
<tr>
<td>Deadline for requests for clarifications and questions. <strong>Any possible exceptions to the bid specifications and/or terms and conditions should be addressed during this phase.</strong> These requests will be answered in an addendum and must be emailed to: <a href="mailto:purchasing@co.henry.ga.us">purchasing@co.henry.ga.us</a></td>
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<tr>
<td><em>Deadline for first addendum, if required, posted on the Henry County website: henrycounty-ga.com/purchasing</em></td>
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<tr>
<td>Sealed proposals will be accepted until the due date and time. Any late submittals received will not be considered. Submittals are to be delivered to Henry County Purchasing Department, 140 Henry Parkway, McDonough, GA 30253.</td>
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**THIS FORM MUST BE SIGNED AND SUBMITTED TO BE CONSIDERED FOR AWARD**

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<td>MAILING ADDRESS:</td>
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<td>SSN OR FEDERAL TAX ID:</td>
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<td>PRINTED NAME:</td>
<td>TITLE OF AUTHORIZED REPRESENTATIVE:</td>
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<td></td>
<td>AUTHORIZED SIGNATURE:</td>
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*The posting of additional addenda may be required and it is the responsibility of the Proposer to ensure that they review the County’s website for any additional addenda, and that they submit acknowledgement of all applicable addenda (on the included form) with their solicitation. Proposers should not expect to be individually notified by Henry County.*
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SECTION I - GENERAL OVERVIEW

A. BACKGROUND
The intent of this invitation is to obtain proposals from qualified vendors to provide occupational medical services on an annual renewable basis. Services include on-the-job/work related, post-accident physical exams and treatment for minor injuries/illnesses due to an on-the-job/work related accident, illness and/or injury; drug/alcohol screening/testing; and return to work (fitness for duty) exams.

B. GENERAL INSTRUCTIONS, TERMS, AND CONDITIONS

1. Proposals Submission
   a. These instructions will bind proposers to terms and conditions herein set forth, except as specifically stated otherwise in special contract terms with any individual proposal. These instructions are to be considered an integral part of the proposal.
   b. Proposals may be submitted by mail, common carrier or delivered in person. Fax or electronic proposals are not acceptable. It shall be the duty of each proposer to ensure that their proposal is delivered within the time and at the place prescribed in this document. Proposals received prior to the time fixed in this proposal document will be securely kept unopened. A date/time stamp will be affixed to the envelope/package immediately upon its arrival to the Purchasing Department. Any proposal received at the office designated in this document after the exact time and date specified, will not be considered. If a late proposal is received via carrier, it will be marked “late proposal” and will not be opened. If a late proposal is hand delivered, it will be returned unopened to the presenter.
   c. At the date and time specified for the opening of the proposal, the proposal shall be publicly opened and read aloud for the information of proposers and others present.
   d. The proposal must be submitted in a sealed envelope/parcel on or before the date and time stated in this document and is to be mailed or delivered to:

   Henry County Purchasing Department
   140 Henry Parkway
   McDonough, Georgia 30253
   RFP # 21-16
   Occupational Medical Services

   e. The Submittal Checklist must be reviewed and the Proposer is to comply with the order of the submittal of documents. This document along with the cover page (page 1) is to be included with the proposal.
   f. The following items are to be submitted:
      • One (1) unbound clearly marked “Original,” of the proposal documents
      • Six (6) bound complete copies (not to exceed a 1/2” capacity ring binder) identical to the original proposal documents, and
      • One (1) digital copy in PDF format on a USB flash drive identical to the original proposal documents. The USB flash drive should be labeled with the RFP number and proposer’s name.
      • If required – One (1) original “Cost Proposal.” The Cost Proposal is to be submitted in a separate sealed envelope and marked “Cost Proposal.”
   g. All proposals must be manually signed and filled out legibly (typewritten or printed in ink) with all changes or corrections initialed by the person signing the proposal.
   h. If descriptive literature is attached to the proposal, your firm’s name must be on all sheets submitted.
   i. Each proposal submitted shall be deemed to have been made with full knowledge of all terms, conditions, and requirements contained in this Proposal request. The failure or omission of any proposer to examine any form, instrument or document shall in no way relieve any proposer from...
obligations in respect to the proposal submittal or the compliance of the terms, conditions and requirements of the proposal.

d. Individual contractors shall provide their Social Security number and proprietorships; partnerships and corporations shall provide their Federal Employer Identification number on page one of this proposal documents and provide a completed W9 form to be submitted with the proposal.

e. The authorized representative whose signature will appear on the proposal submitted certifies that the Proposer has carefully examined the instructions of this proposal and the terms and specifications applicable to and made a part of this proposal. The Proposer further certifies that the prices shown on the Proposal Price Submittal Form is in accordance with the conditions, terms and specifications of the proposal and that any exception taken thereto may disqualify the proposal.

f. Any documentation submitted with or in support of a proposal or proposal shall become subject to public inspection under the Georgia Open Records Act. Labeling such information “Confidential”, “Proprietary”, or in any other manner shall not protect this material from public inspection upon request. All records become subject to public inspection only after award of the contract or purchase order.

2. Preparation of Proposals

a. Negligence on the part of the proposer in preparing the proposal confers no right for withdrawal or modification in any way after the deadline for the proposal opening.

b. Unit price must be shown on the Proposal Cost Submittal Form in this document. All proposals should be tabulated, totaled and checked for accuracy. The unit price will prevail in case of errors.

c. All product, equipment, article or material must be new and unused or current production. No reconditioned or used item(s) will be accepted except as specifically requested herein. Units that are classified as prototype or discontinued models are not acceptable.

d. Samples of items, when required, must be submitted within the time specified and unless otherwise specified by the County, at no expense to the County. Unless otherwise specified, samples will be returned at the proposer’s request and expense if items are not destroyed by testing.

e. Full identification of each item proposal upon, including brand name, model, catalog number, etc., must be furnished to identify exactly what the proposer is offering. Whenever an article or material is defined by describing a proprietary product or by using the name of a manufacturer, the term “or equal” if not inserted shall be implied. The specified article or material shall be understood as indicating the type, function, minimum standard of design, efficiency and quality desired and shall not be construed as to exclude other manufactured products of comparable quality, design and efficiency. In the event that any equivalent version is proposed, prospective proposers are herewith advised that precise, adequate, and documented evidence of equivalency in performance, stability, and operational efficiency should be submitted with the proposal for further consideration. Final determination of equivalency will be determined by Henry County.

3. Clarification and Communication to County Concerning Proposal

a. From time to time, the Purchasing Department may have to release written changes to a solicitation. These formal written changes are called addendum or if multiple, Addenda. It is the responsibility of the Proposer to ensure that they have all applicable addenda prior to the proposal submission. Therefore, we encourage all Proposers to frequently review the County’s website: henrycounty-ga.com/purchasing

All addenda forms must be signed and submitted with the proposal. Failure to respond and acknowledge any addenda, even after the proposal opening, shall result in a non-responsive proposal.

b. The successful firm’s proposal and all addenda will become a part of the agreement resulting from this document.

c. Proposers seeking an award of a Henry County contract shall not initiate or continue any verbal or written communication regarding a solicitation with any County officer, elected official, employee or other County representative without permission of the Purchasing Department.
between the date of the issuance of the solicitation and the date of the final contract award by the
Board of Commissioners. Violations will be reviewed by the Purchasing Director. If determined
that such communication has compromised the competitive process, the offer submitted by the
individual, firm or business shall be disqualified from consideration for award. EXCEPTION to
the above would be emailing request for clarification and/or questions to the Purchasing
Department – purchasing@co.henry.ga.us. (These requests will be answered in an addendum.
Please see schedule of events.)

4.  Pre-Proposal Conference
The Pre-Proposal Conference or any other information session (if indicated in the schedule of events)
will be held at the offices referred to in the “Schedule of Events” of this RFP. Unless indicated
otherwise, attendance is not mandatory; although suppliers are strongly encouraged to attend. However,
in the event the conference has been identified as mandatory, then a representative of the supplier must
attend the conference in its entirety to be considered eligible for contract award.

5.  Rejection and Withdrawal of Proposals
a.  Withdrawal of Proposal due to errors, the supplier has up to forty-eight (48) hours to notify the
Purchasing Department of an obvious clerical error made in calculation of proposal in order to
withdraw a proposal after proposal opening. Withdrawal of proposal for this reason must be done
in writing within the forty-eight hour period.
b.  The County will make a recommendation of the proposal to the Board of Commissioners within
60 days from date of the opening, unless the successful Bidder agrees in writing to a longer period
for the award.
c.  The County may reject all or part of the proposal within 60 days of proposal opening.

6.  Proposal and Contract Documents
a.  A proposal executed by an attorney or agent on behalf of the proposer shall be accompanied by an
authenticated copy of the Power of Attorney or other evidence of authority to act on behalf of the
proposer.

Corporation: If the Proposer is a corporation, the proposal must be submitted in the name of the
Corporation, not simply the corporation’s trade name. In addition, the proposal must be signed by
an officer of the corporation.

Partnership: If the Proposer is a partnership, all partners must sign the proposal. If all the partners
do not sign the proposal, then the names of all those except limited partners must be furnished on
the proposal and evidence of the authority of the signer(s) to execute the proposal on behalf of the
partnership.

Limited Liability Company (LLC): If the Proposer is a limited liability company, the authorized
agent having authority to bind the limited liability company must sign the bid documents.

Sole Proprietorship or Individual: If the Proposer is a sole proprietor or individual, a signature
is required on all bid documents by that individual.
b.  The contract documents consist of this Agreement, Specifications and Addenda issued prior to
execution of this Agreement, other documents listed in this Agreement and Modifications issued
after execution of this Agreement. These form the Contract and are as fully a part of the Contract
as if attached to this Agreement or repeated herein. The Contract represents the entire and
integrated Agreement between the parties hereto and supersedes prior negotiations, representation
or agreements, either written or oral.
c.  Contract Term – The time period of the agreement, if any is formed from this RFP, will be
determined after the review and evaluation of the Time Line Schedules submitted by the
successful Consultant.
7. Exceptions and Omissions
Any exceptions to the specifications and/or terms and conditions must be addressed during the question/clarification and addendum phases.

8. Alterations of Solicitation and Associated Documents
Alterations of County documents are strictly prohibited and will result in automatic disqualification of the proposer’s solicitation response.

9. Cost Incurred by Vendors
All expenses involved with the preparation and submission of the RFP to the Henry County Board of Commissioners, or any work performed in connection therewith is the responsibility of the vendor(s).

10. Codes, Permits, Fees, Licenses and Law
   a. All permits, fees, arrangements for inspections, licenses, and costs incurred for the same shall be the sole responsibility of the successful Proposer. All materials, labor and construction must comply with all applicable rules and regulations of local, state and/or national codes, laws and ordinances of all authorities having jurisdiction over the project, shall apply to the contract throughout and will be deemed to be included in the contract the same as though herein written out in full.
   b. Effective July 1, 2008: All General Contractors must have a current valid license from the State Licensing Board for Residential and General Contractors, unless specifically exempted from holding such license pursuant to Georgia law, O.C.G.A. Section 43-41-17.
   c. State Law regarding Worker Verification requires that all who enter into a contract for the physical performance of services with the County must satisfy O.C.G.A. §13-10-91 and Rule 300-10-1-.02, in all manner, and such are conditions of the contract. By submitting a proposal to the County contractor agrees that in the event the contractor employs or contracts with any subcontractor(s) in connection with the covered contract, the contractor will secure from the subcontractor(s) such subcontractor(s) indication of the employee-number category applicable to the subcontractor, as well as attestation(s) from such subcontractor(s) that they are in compliance. Such attestation(s) shall be maintained and may be inspected by the County at any time. An affidavit of such compliance included with the proposal, must be signed by the contractor, and will become part of the contract.

11. Safety
All vendors and subcontractors performing services are required and shall comply with all Occupational Safety and Health Administration (OSHA), State and County Safety and Occupational Health Standards and any other applicable rules and regulations. Also, all contractors and subcontractors shall be held responsible for the safety of their employees and any unsafe acts or conditions that may cause injury or damage to any persons or property within and around the work site area under this Contract.

12. Design, Standards and Practices
Design, strength, quality of materials and workmanship must conform to the industry acceptable standards of engineering practices and/or professional services.

13. Statement of Warranty
A Statement of Warranty should include all applicable manufacturers’ warranty and the Contractor’s warranty in regards to equipment, materials and workmanship. This statement shall include the terms, conditions and the period of warranty coverage. Any exclusion(s) must be clearly stated.

14. Non-collusion
By submitting a proposal in response to this solicitation, the proposer represents that in the preparation
and submission of this proposal, said Proposer did not either directly or indirectly, enter into any combination or arrangement with any person, Proposer, Corporation or enter into any agreement, participate in any collusion, or otherwise take any action in the restraint of free, competitive bidding in violation of the Sherman Act (15 U.S.C. Section I or Section 59.1-9.1 through 59.1-9.17 or Sections 59.1 – 68.6 through 59.68.8). Collusion and fraud in proposal preparation shall be reported to the State of Georgia Attorney General and the United States Justice Department.

15. **Nondiscrimination**

Notwithstanding any other provision of this Agreement, during the performance of this Agreement Contractor, for itself, its heirs, personal representatives, successors in interest and assigns, as part of the consideration of this Agreement does hereby covenant and agree, as a covenant running with the land, that:

a. No person on the grounds of race, color, religion, sex or national origin shall be excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination;

b. In the production of the vehicle(s), and the furnishing of services therein or thereon, no person on the grounds of race, color, religion, sex or national origin shall be excluded from participation in, or denied the benefits of, such activities, or otherwise be subjected to discrimination.

16. **Drug Free Workplace Certification**

By signing the Supply Service Contract form, the Contractor certifies that the provisions of Code Sections 50-24-1 through 50-24-6 of the Official Code of Georgia Annotated, relating to the “Drug-free Workplace Act”, have been complied with in full. The undersigned further certifies that:

a. A drug-free workplace will be provided for the Contractor’s employees during performance of the contract; and

b. Each Contractor who hires a subcontractor to work in a drug-free work place shall secure from that subcontractor the following written certification:

   “As part of the subcontracting agreement with (Contractor’s name), (Subcontractor’s name) certifies to the Contractor that a drug-free workplace will be provided for the subcontractor’s employees during the performance of this Contract pursuant to Paragraph (7) of Sub-section (b) of Code Section 50-24-3”.

c. The Contractor further certifies that he will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the Contract.

d. Contractor may be suspended, terminated, or debarred if it is determined that:

   (1) The Contractor has made false certification hereinabove; or

   (2) The Contractor has violated such certification by failure to carry out the requirements of the Official Code of Georgia Section 50-24-3.

17. **Georgia Security and Immigration Compliance Act**

Pursuant to the Georgia Security and Immigration Compliance Act of 2006, the successful Contractor understands and agrees that compliance with the requirements of O.C.G.A.13-10-91 and Georgia Department of Labor Rule 300-10-02 are conditions of this proposal and contract document. The Contractor further agrees that such compliance shall be attested by the Contractor and any of his Subcontractors by execution of the appropriate Affidavit and Agreement which will be included and become a part of the Agreement between Henry County and the successful Contractor.

18. **Supplier Inclusion Program**

Small, local, veteran-owned, Disadvantaged Business Enterprise (DBE), and female-owned business enterprises are encouraged to participate in the solicitation process. Please see the Supplier Inclusion Program form for a description of each of these type businesses.
19. **Delivery and F.O.B. Destination**
   a. All prices shall include shipping and delivery cost to our destination; F.O.B., Henry County, Georgia, unless otherwise requested. The proposer shall handle all material procurement, storage and delivery to project site. Unless otherwise specified in this specification, proposer shall supply all materials required. The County will grant no allowance for boxing, crating or delivery unless specifically provided for in this proposal. The proposer shall retain title for the risk of transportation, including the filing for loss or damages.
   b. The County desires delivery of the product(s) or service(s) as specified at the earliest possible time after the date of award. Unreasonable delivery may be cause for disqualifying a proposal. Each firm shall state a definite delivery time and avoid using general terms such as "ASAP" or approximately so many days.

20. **Discounts**
   Cash discounts for early payment (i.e. 2%-10) or Net 30 terms should be shown separately, even if terms are Net.

21. **County’s Tax Exemption**
   Henry County is exempt from Federal Excise Tax or Georgia Sales Tax with regard to goods and services purchased directly by Henry County. Exemption certificates furnished upon request.

22. **Award of Contract**
   a. Henry County desires to complete the award process in a timely manner. Henry County reserves the right to reject or accept any or all proposals, whole or any parts hereof, by item or group of items, by section or geographic area, or make multiple awards and be the final approval of proposal(s) selection which would be the most advantageous to the County with price and other factors considered. Henry County may elect to waive any technicalities. The proposal will be awarded to highest scored proposer(s), if awarded. The proposal specifications and results will be available on the County’s website: henrycounty-ga.com/purchasing.
   b. Henry County reserves the right to reject any proposal if the evidence submitted by or investigation of, the proposer fails to satisfy the County that the proposer is properly qualified to carry out the obligations of the Contract. If the successful proposer defaults on their proposal, an award may be made to the next low responsive and responsible proposer.

**Responsibility** - The determination of the proposer’s responsibility will be made by the County based on whether the proposer meets the following minimum standard requirements:
- Maintains a physical location presence and permanent place of business.
- Has the appropriate and adequate technical experience required.
- Has adequate personnel and equipment to perform the work expeditiously
- Able to comply with the required or proposed delivery and installation schedule.
- Has a satisfactory record of performance.
- The ability of proposer to provide future maintenance and service for the use of the contract under consideration.
- Has adequate financial means to meet obligations incidental to the work.
- Such other factors as appear to be pertinent to either the proposal or the contract.

**Responsiveness** - The determination of the proposer’s responsiveness will be made by the County based on a consideration of whether the proposer has submitted complete proposal documents meeting proposal requirements without irregularities, excisions, special conditions, or alternatives proposals for any item unless specifically requested in the proposal solicitation.

c. Henry County is subject to making records available for disclosure after the Board of
Commissioners approval of the recommendation. The award shall be made by the Board of Commissioners of Henry County unless the lowest, qualified bid is less than the Board of Commissioners’ approval limit. No claim shall be made by the selected Consultant for loss of profit if the contract is not awarded or awarded for less work than is indicated and for less than the amount of the proposal. The total of the awarded contract shall not exceed the available funds allocated for the proposal project.

23. Local Vendor Privilege
   a. There is established in Henry County, a local vendor privilege. Bids or proposals awarded to local vendors contribute to the local tax base and will therefore be given special consideration when bidding against out-of-jurisdiction (out-of-county) vendors. Bids or proposals received from local vendors will be given preference if such bid or proposal is responsive and within five (5) percent of the low bid submitted by any out-of-county bidder. In such instance, the local vendor will be given the opportunity to match the low bid offered by the out-of-county vendor. If such local vendor agrees to match the low bid received from the out-of-county vendor within the time specified by the county, the bid shall be awarded to the local vendor.
   b. A local vendor shall only be eligible to receive the benefit of this privilege if it meets each of the following requirements prior to any award of a contract or purchase:
      (1) The business or supplier must operate and maintain a regular place of business within the geographical boundaries of Henry County; and
      (2) The business or supplier must have a current occupational tax certificate; and
      (3) The business or supplier must have paid all real and personal taxes owed the county; and
      (4) The business or supplier must certify its compliance with the Georgia Security and Immigration Act.
   c. This policy shall not apply to any bid or proposal for material, equipment or services in excess of one hundred thousand dollars ($100,000.00). In such cases, the bid award shall be subject to the competitive bidding requirements as otherwise provided herein or general law.

24. County Direction of Project Site and Monitoring of Work
   a. The Contractor may have a Project Coordinator, but the project site shall remain under the control of Henry County. The Contractor shall provide and make available an appointee to Henry County for project coordination and supervision of Proposer installation personnel. Coordination consist of meeting with the Henry County representatives to review the project; on site walk throughout of installation area(s) before the installation begins; review installation procedures; review installation progress and to handle any problems during installation until project completion.
   b. The successful Proposer will promptly correct all work rejected by the County as faulty, defective, or failing to conform to the Minimum Specifications and/or to consensus standards adopted by both government and industry governing the repairs, whether observed before or after substantial completion of the work, and whether or not fabricated, installed, or completed. The successful Proposer will bear all costs of correcting such rejected work.
   c. The Contractor shall insure all trash generated by work performed shall be removed from the site and properly disposed as each work operation is completed in a given area. Additionally, the Contractor shall ensure all disturbances to the area where the Contractor performed work are restored to the same condition prior to start of the project. If an inspection reveals that the Contractor fails to clean up after work has been performed. The County will notify the Contractor of the discrepancy and the Contractor will have twenty-four (24) hours to make the correction. Should the Contractor still fails to clean the area, the County reserves the right to make other arrangements to have the area cleaned and the County shall deduct the cost from the Contractor’s invoice.
   d. No one except authorized employees of the Contractor is allowed on the premises of Henry County facilities. Contractor employees are not to be accompanied in their work area by acquaintances, family members, assistants, or any other person unless said person is an authorized employee of
25. **Indemnification**
   a. The vendor that is selected as the contractor shall, at its own expense, protect, defend (but only to the extent not prohibited by O.C.G.A. §13-8-2(c)), indemnify, save and hold harmless Henry County and its elected and appointed officers, employees, servants and agents from all claims, damages, lawsuits, costs and expenses including, but not limited to, all costs from administrative proceedings, court costs and attorney fees that Henry County and its elected and appointed officers, employees, servants and agents may incur as a result of the negligence, recklessness, or intentionally wrongful conduct of the Contractor or other persons employed or utilized by the Contractor in the performance of the contract.
   b. The contractor’s indemnification responsibility under this section shall include the sum of damages, costs and expenses which are in excess of the sum of damages, costs and expenses which are paid out in behalf of or reimbursed to the County, its officers, employees, servants and agents by the insurance coverage obtained and/or maintained by the contractor, but only to the extent and for such claims as are permitted under O.C.G.A. §13-8-2(c).

26. **Controlling Law, Venue**
   Any dispute arising as a result of this proposal and/or an Agreement which was created from the terms, conditions and specifications of this document or their interpretation, litigation shall only be entered into and shall be performed in Henry County, Georgia. This Agreement shall be governed by the applicable laws of the County of Henry and the State of Georgia. Any dispute arising out of the agreement, this proposal solicitation, its interpretations, or its performance shall be litigated only in the County of Henry Judicial Courts.

27. **Contractor as Independent Contractor**
   In conducting its business hereunder, Contractor acts as an independent contractor and not as an employee or agent of County. The selection, retention, assignment, direction and payment of Contractor’s employees shall be the sole responsibility of Contractor.

28. **Assignment**
   The Agreement, in whole or any part hereof, created by the award to the successful contractor shall not be sold, not be assigned or transferred by Contractor by process or operation of law or in any other manner whatsoever, including intra-corporate transfers or reorganizations between or among a subsidiary of Contractor, or with a business entity which is merged or consolidated with Contractor or which purchases a majority or controlling interest in the ownership or assets of Contractor without the prior written consent of Henry County.

29. **Owner and Ownership of Documents**
   The Henry County Board of Commissioners, 140 Henry Parkway, McDonough, Georgia 30253 is the owner of the proposed work. Reports and all relevant data such as maps, diagrams, plans, designs, electronic data, statistics, specifications, and other supporting records or drawings compiled or prepared in the course of performance of the services required by this contract shall be the absolute property of the County and shall not be used by the Contractor for purposes unrelated to this contract without the prior written approval of the County. Such original documents shall be turned over to the County upon completion of the project except that Contractor shall have the right to retain copies of the same.

30. **Performance of Contract**
a. Henry County reserves the right to enforce the Contractor’s performance of this Agreement in any manner prescribed by law or deemed to be in the best interest of the County in the event of breach or default or resulting contract award. It will be understood that time is of the essence in the Bidder’s performance.
b. The successful Contractor shall execute the entire work described in the Contract Documents, except to the extent specifically indicated in the Contract documents to be the responsibility of others.
c. The Contractor accepts the relationship of trust and confidence established by the award of this bid solicitation. The Contractor covenants with the County to utilize the Contractor’s best skill, efforts and judgment in furthering the interest of the County; to furnish efficient business administration and supervision; to make best efforts to furnish at all times an adequate supply of workers and materials; and to perform the work in the best way and most expeditious and economical manner consistent with the interest of the County.
d. All purchases for goods or services are subject to the availability of funds for this particular purpose.

31. Default and Termination
a. Termination by Contractor
The agreement resulting from this bid shall be subject to termination by Contractor in the event of any one or more of the following events: The default by County in the performance of any of the terms, covenants or conditions of this Agreement, and the failure of County to remedy, or undertake to remedy such default, for a period of thirty (30) days after receipt of notice from Contractor to remedy the same.
b. Termination by County
The agreement resulting from this bid shall be subject to termination by the County at any time in the opinion of the County; the contractor fails to carry out the contract provisions of any one or more of the following events:

1. The default by Contractor in the performance of any of the terms, covenants or conditions of the Agreement, and the failure of Contractor to remedy, or undertake to remedy with sufficient forces and to the County’s reasonable satisfaction, the County shall provide the vendor with notice of any conditions which violate or endanger the performance of the Agreement. If after such notice the Contractor fails to remedy such conditions within thirty (30) days to the satisfaction of the County, the County may exercise their option in writing to terminate the Agreement without further notice to the Contractor and order the Contractor to stop work immediately and vacate the premises, to cancel ordered products and/or services with no expense to the County.

2. Contractor files a voluntary petition in bankruptcy, including a reorganization plan, makes a general or other assignment for the benefit of creditors, is adjudicated as bankrupt or if a receiver is appointed for the benefit of creditors, is adjudicated as bankrupt or if a receiver is appointed for the property or affairs of Contractor and such receivership is not vacated within thirty (30) days after the appointment of such receiver.

3. Contractors’ failure to conduct services according to the approved bid specifications.
4. Contractors’ failure to keep, perform, or observe any other term or condition of this Agreement.
5. Contractor’s performance of the contract is unreasonably delayed.
6. Should the successful Bidder fail to provide the commodities or services when ordered, and in accordance with the General Terms and Conditions, specifications and any other requirements contained herein are not met, the County reserves the right to purchase commodities or services covered by this contract elsewhere if available from an alternate source.

7. The Contractor agrees by its bid submission that the County’s decision is final and valid.
c. Force Majeure
Neither party shall be held to be in breach of the Agreement resulting from this bid, because of any failure to perform any of its obligations hereunder if said failure is due to any act of God, fire, flood, accident, strike, riot, insurrection, war, or any other cause over which that party has no control. Such party shall give notice and full particulars of such Force Majeure in writing to the other party within a reasonable time after occurrence of the event and the obligation of the party giving such notice shall endeavor to remove or overcome such inability with all reasonable dispatch.

d. **Waiver**

The waiver of any breach, violation or default in or with respect to the performance or observance of the covenants and conditions contained herein shall not be taken to constitute a waiver any subsequent breach, violation or default in or with respect to the same or any other covenant or condition hereof.

32. **Invoices**

Invoices and/or statements should not be faxed but originals must be mailed directly to:

Henry County Board of Commissioners  
Finance Department  
140 Henry Parkway  
McDonough, GA  30253

The following information must appear on all invoices submitted:

- Name and address of successful Bidder;
- Detailed breakdown of all charges for the services or products delivered stating any applicable period of time;
- Henry County’s Purchase Order Number and Bid Package number;
- Invoices shall be based upon actual services rendered, actual work performance and/or products delivered.

33. **Payment**

Payment shall be tendered to the successful Bidder upon acceptance and approval by the County for satisfactory compliance with the general terms, conditions and specifications of the bid; by completed services; verification of delivery of products; assurance that the product/service performs as specified and warranted; and receipt of a valid invoice.

34. **Insurance Requirements**

General insurance requirements shall be applicable to the Contractor and any authorized subcontractor. Insurance requirements shall be based on conditions in place as of the date of the Contract's execution. Insurance companies must be licensed by the Georgia Department of Insurance and the Georgia Secretary of State to do business in the State of Georgia. The County reserves the right to require adjustments in the level of coverage or waive any or all requirements based on information pertinent to this Contract.

The following requirements shall also be applicable to the Contractor:

a. Evidence of insurance must be provided to the Purchasing Department, 140 Henry Parkway, McDonough, Ga. 30253, within five days of execution of this contract and prior to commencing operations under this Contract;

**The certificate holder is to be issued to:**

Henry County Board of Commissioners  
Henry County, Georgia  
but delivered to:  
Henry County Purchasing Department  
140 Henry Parkway
b. The insurance policy required herein shall include a Project-specific endorsement incorporating the indemnification obligations assumed by the Contractor under the terms of this Agreement.

c. Any change in coverage or insurance carrier must be reported to the County’s Purchasing Office in writing within five business days of the change.

d. Failure of any Contractor to procure and maintain the required insurance shall not relieve the Contractor of any liability under the Contract, nor shall these requirements be construed to conflict with the obligation of the Contractor concerning indemnification;

e. Any and all insurance required by this Contract shall be maintained during the entire term of this Contract;

f. The County shall, without exception, be given no less than thirty (30) days notice prior to cancellation for any and all reasons other than non-payment of premium; and

g. The County shall, without exception, be given immediate notification in the event of cancellation for reasons of non-payment of premium.

h. The Contractor shall procure and maintain insurance coverage in the following particulars:

**Workers Compensation Insurance**

In the amounts of the statutory limits established by the General Assembly of the State of Georgia (A self-insurer must submit a certificate from the Georgia Board of Workers compensation stating that the Contractor qualifies to pay its own workers compensation claims.) In addition, the Contractor shall require that all subcontractors occupying the premises or performing the work under the contract to obtain an insurance certificate showing proof of Worker Compensation Coverage with the following minimum coverage:

- Georgia Statutory including Employers Liability
  - Bodily injury by Accident – each employee: $100,000
  - Bodily injury by Disease - each Employee: $100,000
  - Bodily injury by Disease – policy limit: $500,000

- **Commercial General Liability**
  - Each Occurrence Limit: $1,000,000
  - Personal and Advertising Injury Limit: $1,000,000
  - General Aggregate Limit: $2,000,000
  - Products/Completed Operations Aggregate Limit: $2,000,000

- **Automobile Liability**
  - Combined Single Limit: $1,000,000

- **Professional Liability Limit**
  - $1,000,000
SECTION II - SPECIFICATIONS

A. SERVICE REQUIREMENTS

1. The Contractor shall furnish all materials, facilities, equipment, personnel and services required to provide the medical protocols listed for perspective and current County employees. Henry County currently has approximately 1,750 active employees. Services include on-the-job/work related, post-accident physical exams and treatment for minor injuries/illnesses due to an on-the-job/work related accident, illness and/or injury; drug/alcohol testing; and return to work (fitness for duty) exams.

2. The Contractor shall have at least five consecutive years of experience providing the services outlined in this RFP.

3. The Contractor shall possess knowledge of applicable laws, regulations and codes and shall be familiar with local conditions and trends relating to Occupational Medical Services. The Contractor also must comply with the Georgia Security and Immigration Compliance Act, regarding I-9 employment verification using the Employee Eligibility Verification Program.

4. All services shall be provided at the Contractor’s specified location. The Contractor shall provide at least one facility within Henry County, Georgia, preferably in the city of McDonough, Georgia.

5. The preferred hours of operation are Monday through Sunday, 7:00 AM to 7:00 PM, but shall not be less than Monday through Friday, 8:00 AM to 5:00 PM, with a dedicated area for occupational health services only.

6. The Contractor shall provide at least one facility with 24 hour a day, seven days a week hours of operational. The preferable 24/7 location is within Henry County, Georgia, but must be located no more than 25 road miles from the Henry County, Georgia, Administration Building (140 Henry Parkway, McDonough, GA).

7. Wait Time: all Henry County employees shall not have a wait of more than 30 minutes before receiving medical services; any/all exceptions must be communicated to the Henry County Risk Management Department within 24 hours of the occurrence.

8. The facilities that services are provided shall comply with and the Federal Transit Authority (FTA), the Federal Motor Carrier Safety Administration (FMCSA) and/or the Georgia Department of Transportation (DOT) current drug and alcohol regulations/certifications. Henry County reserves the right to inspect the facilities to ensure such compliance.
   - FMCSA/FTA/DOT: All drug testing under the FMCSA/FTA regulations must be completed in a laboratory certified by the Department of Health and Human Services (DHHS) under the National Laboratory Certification Program (NLC).
   - EBT (Evidential Breath Testing) Device: EBT must be capable of conducting air blank tests and external calibration checks; must be approved by NHTSA and operated by qualified and trained Breath Alcohol Technicians.
   - Collection Site: The site must meet DOT guidelines, including the collection site shall provide all necessary personnel, materials, equipment, facilities and storage space necessary to conduct the tests consistent with the regulations.

9. All services shall be provided by Board Certified physicians, licensed psychologists or
professionals who are licensed by the State of Georgia. All written reports submitted to the County must contain the name and registration (license) number of the reporting physician.

10. The selected Contractor will be required to assume responsibility for all services offered in the proposal whether they possess them within their organization. Further, Henry County will consider the selected Contractor to be the sole point of contact regarding contractual matters, including payment of any and all charges resulting from the contact.

11. The Contractor shall provide timely and accurate communication to the Henry County Risk Management Department to include medical treatment notes, work status, drug testing results and any other reports related to the employee’s job-related injury/illness or post-accident test results. Communications should be sent via email or as specified by the director of the Risk Management Department, as soon as they become available.

12. The Contractor may be required to provide written results using Henry County approved forms.

13. The Contractor shall provide thorough and complete medical records review and evaluation, including medical information from external providers and coordination of receiving those records.

14. The licensed Medical Physician shall sign all releases verifying both medical and psychological clearance and non-clearance.

15. The Henry County Risk Management Department shall be granted access to converse with physician and/or psychologist concerning all findings.

16. This agreement may be amended as required by the Georgia Peace Officers Standards Training (P.O.S.T.) Council or other governing agencies, including Henry County government, with proper notification.

17. Henry County shall verify services and render payment for all appropriate items. Questions regarding services and fees shall be directed to the appropriate staff of the Contractor.

B. SCOPE OF WORK

1. Post-Offer/Pre-Employment Physical Examination
   a. Evaluation by a medical professional to determine if an individual is physically and/or mentally able to perform the essential functions of their desired position, as defined in the job description provided by the County.
   b. Results communicated back to the County within 24 hours (unless otherwise noted).
   c. Rapid drug screen/test with immediate results.

2. Perform Job Related Physical Examination, Testing and Screening
   Perform physical examinations/tests for certain positions based on job description provided. For example: Crew Worker – Tasks require the ability to exert heavy physical effort in heavy work, with greater emphasis on climbing and balancing, but typically also involving some combination of stooping, kneeling, crouching, and crawling, and the lifting, carrying, pushing, and/or pulling of moderately heavy objects and materials (20-50 pounds); may occasionally involve heavier objects and materials (up to 100 pounds).

3. Utilize Henry County’s “Panel of Physicians”
   The Contractor shall refer Henry County employee patients for any auxiliary services (e.g., MRI, physical therapy, etc.) only to a physician/location listed on the County’s most current Panel of

4. Return-to-Work (RTW) Physical and Fitness for Duty Examination
   a. As requested by the evaluation by a medical professional to determine if an employee is physically and/or mentally able to perform the essential functions of his/her position, as defined in the job description as provided by the County.
   b. Provide thorough and complete medical records review and evaluation, including medical information from external providers and coordination of receiving those records.
   c. Receive and evaluate results for Return-to-Work and/or Fitness for Duty Examinations provided by other vendors and provide findings and recommendations to the County within 24 hours of completed examination.

5. Drug and Breath Alcohol Testing
   The Risk Management Department will provide the Contractor with proper protocol of testing requirements for specific County positions/departments. Types of drug and/or breath alcohol testing required may include, but not be limited to, the following:
   a. On-the-job Injury / Workers’ Compensation-related Testing
   b. Vehicle Post-Accident Testing
   c. Random Testing
   d. Reasonable Suspicion Testing.

6. Psychological Examinations
   a. Psychologist shall use current testing methods, in compliance with the American Psychological Association.
      (1) All testing shall be performed in a private office or setting.
      (2) All appointments times shall have no more than a 30-minute wait. All exceptions must be communicated with the County Human Resources Department within 24 hours of the occurrence.
   b. Psychologist shall send a completed Psychological Assessment, indicating his/her recommendation, to the County’s authorized Medical Facility. This Assessment shall be forwarded to the Medical Facility and the County Human Resources Department within five business days. All exceptions must be communicated with the director of the County Human Resources Department.
   c. The psychologist shall send all invoices for services to the County authorized Medical Facility.
      (1) The County authorized Medical Facility shall verify the Psychologist’s invoices and make payment directly to the Psychologist.
      (2) The County authorized Medical Facility shall invoice Henry County for psychological tests, if appropriate. All charges shall be as indicated in the agreement for services.

C. CONTRACT TERMS

1. Contract Term
   The initial contract term shall be one (1) year from the date of execution. The contract may be renewed for two (2) additional one (1) year periods. Renewal of the contract, if applicable, into the second or third year will be made sixty (60) days prior to the expiration date. If needed, the annual contract will be extended 90 days or for such period beyond the contract expiration date as it may be necessary to afford the County a continuous supply of the item(s). Should the bidder or the County not desire to renew the contract, new bids will be solicited for the purpose of establishing a new contract.
2. **Pricing/Quantities**
   
a. All prices shall be F.O.B. destination and shall include all charges (labor, materials / supplies, equipment and services) that may be incurred in fulfilling the terms of this bid.

b. Prices submitted herein should remain firm for the contract agreement period. Requests for price increases are strongly discouraged and may only be submitted in writing 60 days prior to the contract renewal date. All requests for price increases require the review and approval of the Henry County Board of Commissioners and will be presented as a request for a contract amendment.

c. This is a unit/price contract. The County shall not be bound to purchase a minimum quantity nor restricted to a maximum quantity during the initial contract agreement period and any subsequent renewals.
SECTION III - PROPOSAL FORMAT

A. TECHNICAL PROPOSAL
Please follow format below for your proposal’s response and provide six (6) sections under separate tabs as follows:

Section 1 – Company’s Information
a. Provide the location of any office, including the location of the Medical Review Officer (MRO), which will handle the County’s account, as well as, the service(s) rendered by each such office. Include hours of operation.
b. Describe your organizational structure and include an organizational chart. Describe the staff retention program to assure continuity of service to the County. Confirm that you serve as an independent company, and are not affiliated with any insurance company, third-party administrative agency or provider network.
c. Describe your company’s organization and management style and provide a brief history of your organization (how long your organization has been providing occupational health services, date established, size, expected future growth, number of employees, and number of years in business under the same name).
d. Describe your contractual relationships, if any, with organizations necessary to your qualifications and implementation of this RFP.
e. Provide details of any changes in ownership that have occurred in the last five (5) years, details of any anticipated mergers, transfers of organization or ownership, management or departure of key staff members within the next twelve (12) months. Please list previous company name(s).
f. Provide a listing of any lawsuit or litigation and the result of that action resulting from: (a) any project undertaken by the proposer or its subcontractors or affiliates where litigation is still pending or has occurred within the last ten (10) years; and (b) any type of project where claims or settlements were paid by the proposer or its insurers within the last ten (10) years.

Section 2 – Experience/Qualifications
a. Describe all relevant experience in providing medical services as described in this RFP, specifically local government.
b. Provide a resume or summary of qualifications, work experience, education, skills, etc., which emphasizes previous experience in this area for all key personnel who will be involved with any aspects to perform the services requested.
c. List all Urine Collection Technicians (UCT) qualified to perform USDOT urine specimen collections include date of initial and last refresher training for all.
d. List all Breath Alcohol Technicians (BAT) and Salvia Test Technicians (STT) qualified to perform USDOT alcohol test include date of initial and last refresher training for all.
e. Provide references for related work over the past three (3) years, including client name, mailing address, contact name and phone number, email address, and a description of the services provided.

Section 3 – Management of Services
a. Describe procedures used to conduct alcohol and drug testing.
b. Describe your company’s random drug/alcohol screening selection process.
c. List the equipment that will be used for alcohol testing to include; device type/make & model/serial number or lot number.
d. Identify and name the computer information system used to maintain the confidentiality of health care information generated in accordance with the provisions of the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all other federal, state, and local laws.
e. Specify any additional services that you offer which may be beneficial to County employees.

Section 4 – Required Forms and Documents

B. COST PROPOSAL
The Cost Proposal is to be submitted with the “Original” in a separate sealed envelope and marked “Cost Proposal”. Cost for each line item, subtotals for each section, and a total for the cost of all line items are to be included. The fees should include all expenses associated with providing these services.
SECTION IV – EVALUATION AND SELECTION CRITERIA

Henry County’s selection of a firm shall be based upon the demonstrated competence and qualifications of the firms to provide the type of service required. Each proposal will be evaluated and scored through a process by the County’s staff.

The Proposer’s submittal must fully address the requirements listed in this solicitation and the Firm’s degree of experience, knowledge, and ability to provide experienced and qualified support staff. The proposal is not to have any exclusions, conditions or provisions applied to the aforementioned request. It is the County’s intention to select a firm which is the most qualified to meet the County’s needs. The award shall be based on but not limited to the following factors:

<table>
<thead>
<tr>
<th>RFP EVALUATION CRITERIA</th>
<th>Scoring Value Maximum Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Relevant Experience and References</strong></td>
<td></td>
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<tr>
<td>Consideration will be given to respondents demonstrating strong capabilities, experience and reputation in the undertakings similar to those described in this RFP. Proposal responses should detail the following:</td>
<td></td>
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<tr>
<td>• Organizational structure and the capacity of staff required for this service</td>
<td>40</td>
</tr>
<tr>
<td>• Evidence of relevant experience in providing requested medical services, specifically local government</td>
<td></td>
</tr>
<tr>
<td>• Qualifications of assigned personnel.</td>
<td></td>
</tr>
<tr>
<td>• References with a minimum of three (3) full years of satisfactory service</td>
<td></td>
</tr>
<tr>
<td>• Information regarding any ongoing litigation and settlements that have occurred over the past three (3) years</td>
<td></td>
</tr>
<tr>
<td><strong>Methodology and Technical Approach to the Project, Quality and Completeness of the Response of the Proposal.</strong></td>
<td></td>
</tr>
<tr>
<td>Submittal of statement of work, commitment to the program and understanding the scope of the proposal. The quality and effectiveness of the proposed approach to accomplish the tasks in the scope of work. The ability to clearly articulate the needs of the County and the capacity to address that need will also be a factor in the selection process. Firm must have proven ability to accomplish the services in a professional, thorough and timely manner. Proposal should include:</td>
<td></td>
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<tr>
<td>• A detailed account of how Occupational Medical Services will be provided based on the requirements listed in this RFP.</td>
<td>40</td>
</tr>
<tr>
<td>• Adequate detail to ensure proposed facility meets all the minimum requirements (location, hours of service, etc.)</td>
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<tr>
<td><strong>Price Structure</strong></td>
<td></td>
</tr>
<tr>
<td>• Point allocation for this category will be based on the totals listed on the <em>Price Structure Evaluation Forms</em> by utilizing the percentage based analysis as presented below.</td>
<td>20</td>
</tr>
<tr>
<td><strong>MAXIMUM SCORING POINTS TOTAL</strong></td>
<td>100</td>
</tr>
<tr>
<td><strong>Oral Presentation and Product Demonstration</strong> - At its sole discretion, the Evaluation Committee made up of County employees may require an interview/presentation before the final selection and award to a Firm. Submittal of material and information during an interview/presentation could add up to 15 additional points to the total score of the Firm.</td>
<td>15</td>
</tr>
</tbody>
</table>
SPECIAL NOTE - the Proposal Cost will be evaluated as follows:

- Low Conforming Proposal  20 points
- Proposals within 5% of Low Proposal  15 points
- Proposals within 7% of Low Proposal  10 points
- All Others  5 points

Best and Final Offer Process represents an optional step in the selection process and may be used when:

a. No single response addresses all the specifications.
b. The cost submitted by all proposers is too high.
c. The scores of two (2) or more proposers are very close after the evaluation process.
d. All proposers submitted responses that are deficient in one or more area.

Henry County reserves the right to remove the high score and the low score for each offer if deemed necessary.

The County reserves the right to negotiate the fee and/or Scope of Services with the highest ranked Proposer. If negotiations cannot be completed successfully, then the County reserves the right to negotiate with the second highest ranked Contractor. Recommendations for an award will be the Proposer with whom potential contract negotiations were successful.
# Henry County Standard Contract Form

<table>
<thead>
<tr>
<th>Solicitation Title</th>
<th>Solicitation Number</th>
<th>Contract Number</th>
</tr>
</thead>
</table>

1. This Contract is entered into between Henry County and the Contractor named below:

<table>
<thead>
<tr>
<th>Henry County</th>
<th>(hereafter called County)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractor’s Name</td>
<td>(hereafter called Contractor)</td>
</tr>
</tbody>
</table>

2. Contract to Begin: | Date of Completion: | Renewals: |

3. Lump Sum Amount of this Contract (if applicable) | Fee Represented as a Percentage Of Designated Cost (if applicable) | Revenue Represented as a Percentage of a Designated Lump Sum or Income Stream (if applicable) | Annual Contract Price Agreement (if applicable) |

4. The parties agree to comply with the terms and conditions of the following documents which are by this reference made a part of the Contract:

1: All Terms, Conditions and Statements of Work Included in Solicitation and Addendum (referenced above)  
2: Bid or Proposal Submitted by Contractor along with Contractor’s Final Response  
3: Fee/Cost Submitted by Contractor  
4: All Other Documentation Required in Solicitation

IN WITNESS WHEREOF, this Contract has been executed by the parties hereto.

5. Contractor

<table>
<thead>
<tr>
<th>Contractor’s Name (if other than an individual, state whether a corporation, partnership, etc.)</th>
<th>Federal Identification No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>By (Authorized Signature)</td>
<td>Date Signed</td>
</tr>
<tr>
<td>Printed Name and Title of Person Signing</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Telephone Number</td>
<td>E-mail Address</td>
</tr>
</tbody>
</table>

6. Henry County

<table>
<thead>
<tr>
<th>Chair or Designee</th>
</tr>
</thead>
<tbody>
<tr>
<td>By (Authorized Signature)</td>
</tr>
<tr>
<td>Printed Name and Title of Person Signing</td>
</tr>
<tr>
<td>Address</td>
</tr>
</tbody>
</table>
BID AUTHORIZATION AFFIDAVIT

STATE OF GEORGIA
COUNTY OF HENRY

BEFORE ME, the undersigned authority a Notary Public in and for the State of _________________, on this day personally appeared _______________________________ who, after having first been duly sworn, upon oath did depose and say; that the forgoing bid submitted by _______________________________ hereafter called “Bidder” is duly authorized agent of said company and that the person signing said bid has been duly authorized to execute the same. Bidder affirms that they are duly authorized to execute this Agreement, that this company, corporation, firm, partnership or individual has not prepared this bid in collusion with any other Bidder, and that the contents of this bid as to prices, terms or conditions of said bid have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this bid.

The undersigned certifies that the bid prices contained in this bid have been carefully checked and are submitted as correct and final and if bid is accepted, agrees to furnish the articles and/or services listed and offered in this document at the prices and terms stated, subject to the conditions and specifications of this Request for Bid.

Bidder Information:

(Company) __________________________ (Signature) __________________________

(Address) __________________________ (Printed Name) __________________________

(City, State, Zip) __________________________ (Title) __________________________

SWORN TO AND SUBSCRIBED BEFORE ME THIS ________ day of ____________________ 20____

________________________________________________________
Notary Public in and for the State of _________________

(Seal)

(FAILURE TO SIGN THIS SECTION SHALL DISQUALIFY YOUR RESPONSE)
NON-CONFLICT OF INTEREST

By submitting an offer in response to this solicitation, the Firm represents that in the preparation and submission of this proposal, said Firm did not either directly or indirectly, enter into any combination or arrangement with any person, Proposer, Corporation or enter into any agreement, participate in any collusion, or otherwise take any action in the restraint of free, competitive bidding in violation of the Sherman Act (15 U.S.C. Section I or Section 59.1-9.1 through 59.1-9.17 or Sections 59.1 – 68.6 through 59.68.8). Collusion and fraud in proposal preparation shall be reported to the State of Georgia Attorney General and the United States Justice Department.

______________________________ (Officer of Firm) certifies that to the best of our knowledge, no circumstances exist which shall cause a conflict of interest in performing services for Henry County, and that no company or person other than bona fide employees working solely for our firm has been employed or retained to solicit or secure an agreement resulting from this request for proposal.

Signature:  

Print Name:  

Title:  

Firm Address:
GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT
AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of the Henry County Board of Commissioners has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

_________________________________
Federal Work Authorization/ E-Verify User Identification Number

_________________________________
Date of Authorization

_________________________________
Name of Contractor

I hereby declare under penalty of perjury that the foregoing is true and correct. Executed on ______, ____, 20__ in _____ (city), ______ (state).

_________________________________
Signature of Authorized Officer or Agent

_________________________________
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE ______ DAY OF ____________________, 20__.

_________________________________
NOTARY PUBLIC

My Commission Expires:

_________________________________
SUPPLIER INCLUSION PROGRAM

Small, local, veteran-owned, Disadvantaged Business Enterprise (DBE), and female-owned business enterprises are encouraged to participate in the solicitation process. In order to give recognition to these type of business classification, please check all which apply:

☐ Small Business
Small businesses are defined by size standards and can be found in Title 13 of the Code of Federal Regulations (CFR), Part 121, and are broken down by the different categories of business enterprises.

☐ Local Vendor
Local vendors, as defined in the Henry First Initiative, must operate and maintain a regular place of business within the geographical boundaries of Henry County, must have a current occupational tax certificate, must have paid all real and personal taxes owed the County and must certify its compliance with the Georgia Security and Immigration Act.

☐ Veteran-Owned Business
A veteran-owned business is a business in which a veteran owns a minimum of 51% of the business and also holds the highest position at the company and is active in the daily management and strategic direction of the company. Title 38 of the Code of Federal Regulations defines a veteran as “a person who served in the active military, naval, or air service and who was discharged or released under conditions other than dishonorable.” This definition explains that any individual that completed a service for any branch of armed forces classifies as a veteran as long as they were not dishonorably discharged.

☐ DBE Business
DBE businesses, as defined by the Georgia Department of Administrative Services, shall be certified by the Georgia Department of Transportation and shall consist of five (5) minority groups:
☐ Asian American
☐ Native American
☐ African American
☐ Hispanic/Latino
☐ Pacific Islander.

☐ Female Owned Business
A female-owned business is a business in which a female owns a minimum of 51% of the business and also holds the highest position at the company and is active in the daily management and strategic direction of the company.

☐ None of the Above Applies

____________________________________  _____________________________________
Company’s Name                                Date

____________________________________
Authorized Representative’s Name (Print or Type)  Authorized Representative’s Signature
RFP # 21-16
Occupational Medical Services
Cost Proposal

(Note: Proposer must sign and submit their cost proposal in a separate sealed enveloped marked as “Cost Proposal.”)

<table>
<thead>
<tr>
<th>Line Item</th>
<th>Protocols / Services Required</th>
<th>Unit Cost</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Random Testing</td>
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<tr>
<td>1.1</td>
<td>DOT Regulated Drug Screen (Including MRO Service)</td>
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<tr>
<td>1.2</td>
<td>Breath Alcohol Test (Using Evidential Breath Testing Device) - Initial</td>
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<td>1.3</td>
<td>Breath Alcohol Test (Using Evidential Breath Testing Device) - Confirmation</td>
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<td>1.4</td>
<td>Random Drug Pool Set-up Fee</td>
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<td>1.5</td>
<td>Monthly Maintenance Fee for Random Drug Pool</td>
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<td>Reasonable Suspicion Testing</td>
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<td>2.1</td>
<td>DOT Regulated Drug Screen (Including MRO Service)</td>
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<td>2.2</td>
<td>Non-DOT Regulated / Rapid Drug Screen</td>
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<tr>
<td>2.3</td>
<td>Breath Alcohol Test (Using Evidential Breath Testing Device) - Initial</td>
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<td>Breath Alcohol Test (Using Evidential Breath Testing Device) - Confirmation</td>
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<td>3</td>
<td>Post-accident Testing</td>
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<td>3.1</td>
<td>DOT Regulated Drug Screen (Including MRO Service)</td>
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<td>3.2</td>
<td>Non-DOT Regulated / Rapid Drug Screen</td>
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<td>3.3</td>
<td>Breath Alcohol Test (Using Evidential Breath Testing Device) - Initial</td>
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<td>Breath Alcohol Test (Using Evidential Breath Testing Device) - Confirmation</td>
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<tr>
<td>4</td>
<td>DOT Regulated Annual/Bi-Annual Exam</td>
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<tr>
<td>4.1</td>
<td>DOT Regulated Recertification</td>
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<td>4.2</td>
<td>DOT Physical</td>
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<td>4.3</td>
<td>DOT Regulated Drug Screen (Including MRO Service)</td>
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<td>4.4</td>
<td>TB Test (Including Reading)</td>
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<td>4.5</td>
<td>DOT Regulated / Approved Vision Exam</td>
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</table>

Subtotal (DOT Regulated Annual/Bi-Annual Exam)

Company's Name: _____________________________________________________________
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<thead>
<tr>
<th>Line Item</th>
<th>Protocols / Services Required</th>
<th>Unit Cost</th>
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<tbody>
<tr>
<td>5</td>
<td>Respirator Clearance</td>
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<tr>
<td>5.1</td>
<td>Respirator Clearance Physical</td>
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<tr>
<td>5.2</td>
<td>PFT</td>
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<tr>
<td>5.3</td>
<td>EKG</td>
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<td>5.4</td>
<td>Chest X-Ray, 1 View (Physician Request Only)</td>
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<td>Subtotal (Respirator Clearance)</td>
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<td>6</td>
<td>Audiometry/Hearing Conservation</td>
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<td>6.1</td>
<td>Audiogram - Test Only</td>
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<td>6.2</td>
<td>Audiogram - Comprehensive/Hearing Con. Report</td>
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<td>Subtotal (Audiometry/Hearing Conservation)</td>
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<td>7</td>
<td>Optional/Additional Services</td>
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<td>7.1</td>
<td>Hep B shot (Series of 3)</td>
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<td>7.2</td>
<td>Titer</td>
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<tr>
<td>7.3</td>
<td>Hep B Booster</td>
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<td>7.4</td>
<td>HBV Titers – Hepatitis</td>
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<td>7.5</td>
<td>Influenza - Flu</td>
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<td>7.6</td>
<td>Quantiferon/TSpot – Tuberculosis</td>
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<tr>
<td>7.7</td>
<td>MMR – Measles, Mumps and Rubella</td>
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<tr>
<td>7.8</td>
<td>Varicella Titer – Chicken Pox</td>
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<tr>
<td>7.9</td>
<td>Tdap Immunizations – Whooping Cough</td>
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<tr>
<td>8</td>
<td>Pre-Placement Exam/Fitness for Duty Exam</td>
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<tr>
<td>8.1</td>
<td>Physical Exam - Including MRO Service (For Specified Departments/Employees)</td>
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</tr>
<tr>
<td>8.2</td>
<td>TB Test (For Specified Departments/Employees) – Including Reading</td>
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<tr>
<td>8.3</td>
<td>DOT Regulated Drug Screen (Including MRO Service)</td>
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</tr>
<tr>
<td>8.4</td>
<td>DOT Regulated / Approved Vision Exam (For Specified Departments/Employees)</td>
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</tr>
<tr>
<td>8.5</td>
<td>Non-DOT Regulated / Rapid Drug Screen</td>
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<td>8.6</td>
<td>Respirator Clearance with routine P/E (For Specified Departments/Employees)</td>
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<tr>
<td>8.7</td>
<td>PFT/Spirometry (For Specified Departments/Employees)</td>
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</tbody>
</table>

Company’s Name: ____________________________________________
<table>
<thead>
<tr>
<th>Line Item</th>
<th>Protocols / Services Required</th>
<th>Unit Cost</th>
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</thead>
<tbody>
<tr>
<td>8</td>
<td>Pre-Placement Exam/Fitness for Duty Exam - <em>Continued</em></td>
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<tr>
<td>8.8</td>
<td>EKG (For Specified Departments/Employees)</td>
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<tr>
<td>8.9</td>
<td>Chest X-Ray, 1 View (For Specified Departments/Employees)</td>
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<tr>
<td>8.10</td>
<td>CBC with DIFF (For Specified Departments/Employees)</td>
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<td>8.11</td>
<td>Comprehensive Metabolic (For Specified Departments/Employees)</td>
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<td>8.12</td>
<td>Triglyceride (For Specified Departments/Employees)</td>
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<td>8.13</td>
<td>Cholesterol/HDL (For Specified Departments/Employees)</td>
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<td>8.14</td>
<td>TSh (Thyroid) (For Specified Departments/Employees)</td>
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<tr>
<td>8.15</td>
<td>PSA (Males) (For Specified Departments/Employees)</td>
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<tr>
<td>8.16</td>
<td>Back Assessment/Lift Capacity (For Specified Departments/Employees)</td>
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<tr>
<td>8.17</td>
<td>Treadmill Stress Test (For Specified Departments/Employees)</td>
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<tr>
<td>9</td>
<td>Psychological (Required for Pre-placement for Police, Fire, Sheriff and E-911)</td>
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<tr>
<td>9.1</td>
<td>Psychologist shall use current testing methods, in compliance with the American Psychological Association</td>
<td></td>
</tr>
<tr>
<td>9.2</td>
<td>Personal Interview With Applicant/Employee</td>
<td></td>
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<tr>
<td>9.3</td>
<td>Initial Assessment report (form Recommend, Recommend with Reservations, Not Recommend)</td>
<td></td>
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<tr>
<td>9.4</td>
<td>Written Report (Psychometric)- full report (Including POST letter signed by Medical Doctor, if applicable)</td>
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</tr>
<tr>
<td>9.5</td>
<td>Reliability over time of Psychological Screening Test</td>
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</tr>
<tr>
<td>9.6</td>
<td>FIT for duty personal interviews with Employees</td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal (Psychological – Required for Pre-placement for Police, Fire, Sheriff and E-911)**

____________________________________________________________________________________

Company’s Name ___________________________ Date ___________________________

Authorized Representative’s Name (Print or Type) ___________________________

Authorized Representative’s Signature ___________________________
CHECKLIST FOR RFP DOCUMENTS

Failure to include all required documents will result in proposal being removed for consideration for award.

<table>
<thead>
<tr>
<th>DOCUMENTATION DESCRIPTION</th>
<th>Please check</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any Required Documents cited in RFP Specifications</td>
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</tr>
<tr>
<td>W-9</td>
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<tr>
<td><strong>Forms:</strong></td>
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</tr>
<tr>
<td>Solicitation Form (Page 1 of this Document)</td>
<td></td>
</tr>
<tr>
<td>Addendum Cover Sheet(s) (If applicable.)</td>
<td></td>
</tr>
<tr>
<td>Bid Authorization Affidavit</td>
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</tr>
<tr>
<td>Non-Conflict of Interest</td>
<td></td>
</tr>
<tr>
<td>Georgia Security &amp; Immigration Compliance Act Affidavit &amp; Agreement</td>
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</tr>
<tr>
<td>Supplier Inclusion Program</td>
<td></td>
</tr>
<tr>
<td>Cost Proposal <em>(Submit in a separate sealed envelope marked as “Cost Proposal.”)</em></td>
<td></td>
</tr>
<tr>
<td>RFP Documents Submittal Checklist/Addenda Acknowledgement (this page)</td>
<td></td>
</tr>
</tbody>
</table>

ADDENDA ACKNOWLEDGEMENT

Failure to acknowledge any addenda will result in a non-responsive bid.

The vendor has examined and carefully studied the Request for Proposals and the following Addenda, receipt of all of which is hereby acknowledged:

Addendum No. ___________________________________________ Dated
Addendum No ___________________________________________ Dated
Addendum No. ___________________________________________ Dated
Addendum No. ___________________________________________ Dated

This affirms that all documents are included with the proposer’s RFP package.

____________________________________ ______________________
Company’s Name Date

____________________________________ ______________________
Authorized Representative’s Name Authorized Representative’s Signature
(Print or Type)
PLEASE ATTACH LABEL TO OUTSIDE OF RFP PACKAGE

This label **MUST** be affixed to the outside of the envelope or package, even if it is a “No RFP” response. Failure to attach the label may result in your bid being opened in error or not routed to the proper location for consideration. No RFP will be accepted after the date and time specified.

REQUEST FOR PROPOSAL ENCLOSED

RFP # 21-16, Occupational Medical Services
Due Date and Time: September 8, 2020, 3:00 PM

__________________________________________
Vendor Name

__________________________________________
Address

__________________________________________
City, State, Zip Code

DELIVER TO: Henry County Purchasing Department
140 Henry Parkway
McDonough, GA 30253