



NORTH HUDSON
COMMUNITY ACTION CORPORATION

REQUEST FOR QUALIFICATIONS

NORTH HUDSON COMMUNITY ACTION CORPORATION

340B IN HOUSE PHARMACY SERVICES

RFQ Publication Date: Wednesday- September 4, 2024

RFQ Submission Date: Wednesday- September 18, 2024

North Hudson Community Action Corporation will consider proposals only from firms/organizations that have demonstrated the capability and willingness to provide high quality services in the manner described in this Request for Qualifications.

NHCAC – RFQ Definitions

- 1. NHCAC:** refers to North Hudson Community Action Corporation (NHCAC).
- 2. Qualification Statement:** refers to the complete responses to this Request for Qualification (RFQ) Statements submitted by the respondents.
- 3. Qualified Respondent:** refers to those respondents who are determined by NHCAC to have satisfied the qualification criteria set in the RFQ.
- 4. RFQ:** including any amendments or supplements prepared by NHCAC.
- 5. Respondent:** refers to the firm(s) that submit a qualification statement to NHCAC.

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Section I

Introduction and General Information

A. Introduction and Purpose.

North Hudson Community Action Corporation (NHCAC) is a cornerstone of health and human services in New Jersey, serving more than 90,000 low-income residents at 10 locations in three counties. An award-winning leader in its field for more than 50 years, NHCAC has played a vital role in creating much-needed services such as ob-gyn and prenatal care, emergency food and shelter, transitional housing, and mental health and addiction services.

North Hudson Community Action Corporation (NHCAC) is soliciting Qualification Statements from interested persons and/or firms for the provision of **340B In House Pharmacy Services**, as more particularly described herein. Through a Request for Qualification process described herein, persons and/or firms interested in assisting NHCAC with the provision of such services must prepare and submit a Qualification Statement in accordance with the procedure and schedule on this RFQ. NHCAC will review Qualification Statements only from those firms that submit a Qualification Statement which includes all the information required to be included as described herein (in the sole judgment of NHCAC.) NHCAC intends to qualify person(s) and/or firm(s) that (a) possesses the professional, financial and administrative capabilities to provide the proposed services, and (b) will agree to work under the compensation terms and conditions determined by NHCAC to provide the greatest benefit to the organization.

B. Procurement Process and Schedule.

As a recipient of Federal funds under Section 330 of the Public Health Services Act, NHCAC is required to adhere to all applicable Federal procurement rules and regulations as described in 45 CFR Part 74, and other program expectations of the Federally Qualified Health Center program. Respondents are encouraged to become familiar with any special procurement rules that may affect their response to this RFQ.

The selection of Qualified Respondents is not subject to the provisions of the Local Public Contracts Law, N.J.S.A. 40A:11-1 et seq. The selection is subject to the “New Jersey Local Unit Pay-to-Play” Law N.J.S.A. 19:44A-20.4 et seq., however. NHCAC has structured a procurement process that seeks to obtain the desired results described above, while establishing a competitive process to assure that each person and/or firm is provided an equal opportunity to submit a Qualification Statement in response to the RFQ. Qualification Statements will be evaluated in accordance with the criteria set forth in Section 2 of this RFQ, which will be applied in the same manner to each Qualification Statement received.

Qualification Statements will be reviewed and evaluated by the NHCAC and its legal advisor (collectively, the “Review Team”). The Qualification Statements will be reviewed to determine if the Respondent has met the minimum professional, administrative and financial

areas described in this RFQ. Under no circumstances will a member of the review team review responses to an RFQ for a job which they or their firm submitted a response.

Based upon the totality of the information contained in the Qualification Statement, including information about the reputation and experience of each Respondent, NHCAC will (in its sole judgment) determine which Respondents are qualified (from professional, administrative and financial standpoints). Each Respondent that meets the requirements of the RFQ (in the sole judgment of NHCAC) will be designated as a Qualified Respondent and will be given the opportunity to participate in the selection process determined by NHCAC.

The RFQ process commences with the issuance of this RFQ. The steps involved in the process and the anticipated completion dates are set forth in Table 1, Procurement Schedule. NHCAC reserves the right to, among other things, amend, modify or alter the Procurement Schedule upon notice to all potential Respondents.

All communications concerning this RFQ or the RFQ process shall be directed to NHCAC Designated Contact Person, in writing.

Designated Contact Person:

*Joan M. Quigley, President/CEO
North Hudson Community Action Corporation
800 31st Street, Union City, New Jersey 07087*

Qualification Statements must be submitted to, and be received by, NHCAC Office, via mail or hand delivery, by 12:00PM Prevailing Time on September 18, 2024.

Request for Qualification Statements will not be accepted by facsimile transmission or e-mail.

Subsequent to issuance of this RFQ, NHCAC (through the issuance of addenda to all firms that have received a copy of the RFQ) may modify, supplement or amend the provisions of this RFQ in order to respond to inquiries received from prospective Respondents or as otherwise deemed necessary or appropriate by (and in the sole judgment of) NHCAC.

Schedule 1

Schedule of Dates

<u>ACTIVITY</u>	<u>DATES</u>
1. Issuance of Request for Qualifications	September 4, 2024
2. Receipt of Qualification Statements	September 18, 2024
3. Opening of Bids	September 18, 2024
4. Review Team Analysis of Bids	September 18, 2024
5. Designation of Qualified Respondents	September 25, 2024

C. Conditions to the RFQ.

Upon submission of a Qualified Statement in response to this RFQ, the Respondent acknowledges and consents to the following conditions relative to the submission and review and consideration of its Qualification Statement:

- This RFQ does not commit NHCAC to issue an RFQ.
- Respondents are fully responsible for all costs, both direct and indirect, of development and submission of their response to this RFQ, including, but not limited to, any supplementary documentation, information, travel, and presentation expenses.
- NHCAC reserves the right (in its sole judgment) to reject for any reason any and all responses and components thereof and to eliminate any and all Respondents responding to this RFQ from further consideration for this procurement.
- NHCAC reserves the right (in its sole judgment) to reject any Respondent that submits incomplete responses to this RFQ, or a Qualification Statement that is not responsive to the requirements of this RFQ.
- NHCAC reserves the right, without prior notice, to supplement, amend, or otherwise modify this RFQ, or otherwise request additional information.
- All Qualification Statements shall become the property of NHCAC and will not be returned.
- All Qualification Statements will be made available to the public at the appropriate time, as determined by NHCAC (in the exercise of its sole discretion) in accordance with law.
- NHCAC may request Respondents to send representatives to NHCAC for interviews.
- **Any and all Qualification Statements not received by NHCAC Office by 12:00PM Prevailing Time on September 18, 2024 will be rejected.**
- Neither NHCAC nor their respective staffs, consultants or advisors (including but not limited to the Review Team) shall be liable for any claims or damages resulting from the solicitation or preparation of the Qualification Statement, nor will there be any reimbursement to Respondents for the cost of preparing and submitting a Qualification Statement or for participating in this procurement process.

Efforts will be made by NHCAC to utilize small business, women and/or minority owned businesses. An applicant qualifies firm if it meets the definition of "small business" as established by the Small Business Administration (13 CFR § 121.201)

Addenda or Amendments to RFQ.

During the period provided for the preparation of responses to the RFQ, NHCAC may issue addenda, amendments or answers to written inquiries. Those addenda will be noticed by NHCAC and will constitute a part of the RFQ. All responses to the RFQ shall be prepared with full consideration of the addenda issued prior to the proposal submission date.

E. Cost of Proposal Preparation.

Each proposal and all information required to be submitted pursuant to the RFQ shall be prepared at the sole cost and expense of the respondent. There shall be no claims whatsoever against NHCAC, its staff or consultants for reimbursement for the payment of costs or expenses incurred in the preparation of the Qualification Statement or other information required by the RFQ.

F. Proposal Format.

Responses should cover all information requested in the Questions to be answered in this RFQ.

Responses which in the judgment of NHCAC fail to meet the requirements of the RFQ or which are in any way conditional, incomplete, obscure, contain additions or deletions from requested information, or contain errors may be rejected.

Section II

It is the intent of NHCAC to solicit Request for Qualification Statements from Respondents that have expertise in the provision of **340B In House Pharmacy Services** for the position of **340B In House Pharmacy Services** to North Hudson Community Action Corporation. Firms and/or persons responding to this RFQ shall be able to demonstrate that they will have the continuing capabilities to perform this/these services.

North Hudson Community Action Corporation is interested in receiving Qualification Statements from Respondents which have expertise serving as **340B In House Pharmacy Services** to North Hudson Community Action Corporation and who have proven experience in the area of services varying from maintenance and repairs, additions and renovations. Respondents must have the ability to act as liaison between multiple departments/and/or agencies at the request of the North Hudson Community Action Corporation.

Respondents should be able to demonstrate their expertise through formal education and certification; special knowledge, training and experience working with other corporations or agencies.

Section III

SUBMISSION REQUIREMENTS

Section A General Requirements.

The Qualification Statement submitted by the Respondent must meet or exceed the professional, administrative and financial qualifications set forth in this Section III and shall incorporate the information requested below.

In addition to the information required as described below, a Respondent may submit supplemental information that it feels may be useful in evaluating its Qualification Statement. Respondents are encouraged to be clear, factual, and concise in their presentation of information.

Section B Administrative Information Requirements.

The Respondent shall, as part of its Qualification Statement, provide the following information:

1. An executive summary (not to exceed two (2) pages) of the information contained in all the other parts of the Qualification Statement.
2. An executed Letter of Qualification (See Appendix A to this RFQ).
3. Respondents should precisely list the fees to be charged, whether per hour, per project or otherwise, bearing in mind that North Hudson Community Action Corporation is a not-for-profit community health provider.
4. Respondents should provide any other relevant information that will assist North Hudson Community Action Corporation to select among respondents.
5. Name, address and telephone number of the firm or firms submitting the Qualification Statement pursuant to this RFQ, and the name of the key contact person.
6. A description of the business organization (i.e., corporation, partnership, joint venture, etc.) of each firm, its ownership and its organizational structure.
 - (a) Provide the names and business addresses of all Principals of the firm or firms submitting the Qualification Statement. For purposes of this RFQ, “Principals” mean people possessing an ownership interest in the Respondent. If the Respondent is a corporation, “Principals” shall include each investor who would have any amount of operational control over the Respondent and every stockholder having an ownership interest of 10% or more in the firm.
 - (b) If a firm is a partially owned or a fully-owned subsidiary of another firm, identify the parent company and describe the nature and extent of the parents’ approval rights over the activities of the firm submitting a Qualification Statement. Describe the approval process.

- (c) If the Respondent is a partnership or a joint venture or similar organization, provide comparable information as required in (b) above for each member of the partnership, joint venture or similar organization.
 - (d) A statement that the Respondent has complied with all applicable affirmative action (or similar) requirements with respect to its business activities, together with evidence of such compliance.
5. An executed Letter of Intent (See Appendix B).
 6. The number of years your organization has been in business under the present name.
 7. The number of years the business organization has been under the current management.
 8. A statement that the Respondent in compliance with all applicable affirmative action (or similar) requirements with respect to its business activities, together with evidence of such compliance.
 9. Any judgments within the last three years in which Respondent has been adjudicated liable for professional malpractice. If yes, please explain.
 10. Whether the business organization is now or has been involved in any bankruptcy or reorganization proceedings in the last ten (10) years. If yes, please explain.
 11. Confirm appropriate federal and state licenses to perform activities.
 12. Business Registration Certificate (N.J.S.A.52:32-44).
 13. Iran Disclosure of Investment Activities (N.J.S.A.18A:18A-49.4).
 14. Statement of Ownership (N.J.S.A. 52:25-24.2).
 15. W-9 Form (See Attached).
 16. Political Contribution Disclosure Form (See Attached).

Section C Professional Information Requirements.

- a. Respondent shall submit a description of its overall experience in providing the type of services sought in the RFQ. At a minimum, the following information on past experience should be included as appropriate to the RFQ:
 1. Description and scope of work by Respondent
 2. Name, address and contact information of references
 3. Explanation of perceived relevance of the experience to the RFQ.
- b. Describe the services that Respondent would perform directly.

- c. Describe those portions of the Respondent’s services, if any, that are sub-contracted out. Identify all subcontractors the Respondent anticipates using in connection with this project.
- d. Does the Respondent normally employ union or non-union employees.
- e. Resumes of employees that would be assigned to NHCAC.
- f. A narrative statement of the Respondent understands of NHCAC’s needs and goals for the organization.
- g. List all immediate relatives of Principal(s) of Respondent who are NHCAC employees or elected officials of the County. For purposes of the above, “immediate relative” means a spouse, parent, stepparent, brother, sister, child, stepchild, direct-line aunt or uncle, grandparent, grandchild, and in-laws by reason of relation.

Principles of Consolidated Financial Statement:

The financial statements shall include the accounts of North Hudson Community Action Corporation and North Hudson Community Action Foundation, Inc. (collectively referred to as the “Organization”). The entities are consolidated based on control and economic interest.

Description of Project

NHCAC is seeking an experienced vendor to run an in house 340B contract pharmacy at our West New York health center located at 5301 Broadway, West New York, NJ 07093 and at our Passaic Health Center 220 Passaic Street, Passaic, NJ. The vendor shall also be responsible for stocking, staffing, operating and management of the contract pharmacy. Patient counseling and patient compliance with medication regimen shall be a component of the policies and procedures of contract pharmacy as well as other measures to integrate the contract pharmacy into our Primary Care Medical Home model.

Specific Requests/Requirements

Requirement A – FQHC Experience. Please list federally qualified health centers with which you have provided services for.

Requirement B- Make monthly payments to NHCAC equal to prior month’s collections minus the prior month’s fees due to vendor.

Requirement C- Vendor must procure all licenses and credentials from NJ State and Federal agencies necessary for operation of contract pharmacy.

Requirement D- Vendor shall establish and maintain a tracking system suitable to prevent the diversion of Covered Drugs to individuals who are not Eligible Patients.

Requirement E- Pharmacy shall reimburse NHCAC for cost of annual independent audit of contract pharmacy in compliance with requirements of 340B program.

Requirement F-Pharmacy shall develop and implement (with assistance of NHCAC), a Policy and Procedure Manual, which shall be amended from time to time, as necessary to comply with the requirements of the 340B program and all applicable State and Federal Statutes and regulations.

Requirement G- Pharmacy will provide NHCAC direct access to Pharmacist during its regular business hours with all calls not immediately answered returned within one hour.

Requirement H- Pharmacy will diligently pursue resolution and promptly notify NHCAC of any material issue that remains unresolved for more than two (2) business days, or immediately if patient care is at risk.

Requirement I- Pharmacy will monitor all eligible patients requiring refills for medication adherence on a monthly basis. Pharmacy will notify NHCAC of any material medication adherence issue the same day discovered.

Requirement J- Pharmacy shall make a monthly accounting of NHCAC's Provider's Contract Pharmacy Account to NHCAC in order to reconcile all deposits and expenditures from NHCAC's contract pharmacy account.

Right to Reject

NHCAC reserves the right to reject any and all proposals submitted and to request additional information from all proposers. Any contract awarded will be to the independent auditor who, based on evaluation of all responses, applying all criteria and oral interviews, if necessary, is determined to be the best qualified to do the audit.

Contractual Arrangements and Remedies for Violations

Invoices for service will be paid when received. The total amount to be invoiced shall not exceed the amount of the bid. NHCAC reserves the right to terminate the contract for the audit at any time. Should a federal or state agency reject the audit as deficient, NHCAC may withhold payment for services until the audit deficiency is corrected. Should the audit firm fail to correct the audit deficiency; the audit firm will be barred from further engagements with NHCAC and possible reduction in fees.

Method of Evaluating Proposals

Proposals will be evaluated with a strict emphasis on quality. The federal government has the authority to review the audit report and audit work papers to ascertain the quality of the audit. In response to a deficient audit, the cognizant agent or its designees of the federal government can disallow the cost of the audit as an allowable cost of the federal grants. As such, the primary emphasis of procuring an audit will be the quality of the technical factors of the audit firm. Attributes that will be analyzed include:

1. Number of non-profit organizations audited by proposing firm.
2. Involvement in non-profit related organizations.
3. Training of personnel in non-profit and federal grant auditing.
4. Quality of staff included in assignment.
5. Reference responses
6. Maintenance of a partner on the engagement of audit.
7. Internal quality control procedures and external quality control reviews.
8. Ability to communicate audit results in an effective manner.

After the technical qualities have been evaluated, cost and other considerations will be evaluated. The proposing audit firm should indicate the cost of the audit for the two years in the RFQ

Section IV

Instructions to Respondents

Section A Submission of Qualification Statements.

Respondents must submit one (1) original and two (2) copies of their Qualification Statement to the Designated Contact Person:

*Joan M. Quigley, President/CEO
North Hudson Community Action Corporation
800 31st Street, Union City, New Jersey 07087*

Qualification Statements must be received by NHCAC Office no later than **12:00PM** (prevailing time) on **September 18, 2024** and must be mailed or hand-delivered. Qualification Statements forwarded by facsimile or e-mail **will not** be accepted. Qualification Statements received after this time will not be considered. NHCAC will not bear responsibility for delays in delivery for any reason.

To be responsive, Qualification Statements must provide all requested information, and must be in strict conformance with the instructions set forth herein. Qualification Statements and all related information must be bound, and signed and acknowledged by the Respondent.

Section V

Evaluation

NHCAC's objective in soliciting Qualification Statements is to enable it to select a firm or organization that will provide high quality and cost-effective services to the Organization NHCAC. NHCAC will consider Qualification Statements only from firms or organizations that, in NHCAC's judgment, have demonstrated the capability and willingness to provide high quality services to the citizens of NHCAC in the manner described in this RFQ.

Proposals will be evaluated by NHCAC on the basis of the most advantageous submission, all relevant factors considered. The evaluation will consider:

1. Experience and reputation in the field;
2. Knowledge of NHCAC and the subject matter addressed under the contract;
3. Availability to accommodate the required meetings of NHCAC; and
4. Other factors demonstrated to be in the best interest of NHCAC.

Letter of Qualification

(Typed on Respondent’s Letterhead. No modifications may be made to this letter)

[Insert date]

*Joan M. Quigley, President/CEO
North Hudson Community Action Corporation
800 31st Street, Union City, New Jersey 07087*

Dear Ms. Quigley:

The undersigned has/have reviewed my/our Qualification Statement submitted in response to the Request for Qualification (RFQ) issued by North Hudson Community Action Corporation, dated **September 4, 2024**, in connection with NHCAC’s need for **340B In House Pharmacy Services**.

I/We affirm that the contents of my/our Qualification Statement (which Qualification Statement is incorporated herein by reference) is accurate, factual and complete to the best of our knowledge and belief and that the Qualification Statement is submitted in good faith upon express understanding that any false statement may result in the disqualification of (Name of Respondent).

(Respondent shall sign and complete the spaces provided below. If a joint venture, appropriate officers of each company shall sign.)

(Signature of Chief
Executive Officer) _____

(Signature of Chief
Financial Officer) _____

(Typed Name and Title)
(Type Name of Firm)* _____

(Typed Name and Title)
(Type Name of Firm)* _____

Dated: _____

Dated: _____

* If a joint venture, partnership or other formal organization is submitting a Qualification Statement, each participant shall execute this Letter of Qualification.

Letter of Intent

(Typed on Respondent's Letterhead. No modifications may be made to this letter)

[Insert date]

*Joan M. Quigley, President/CEO
North Hudson Community Action Corporation
800 31st Street, Union City, New Jersey 07087*

Dear Ms. Quigley:

The undersigned, as Respondent, has (have) submitted the attached Qualification Statement in response to a Request for Qualifications (RFQ), issued by North Hudson Community Action Corporation, dated **September 4, 2024**, in connection with NHCAC's need for

340B In House Pharmacy Services.

(Name of Respondent) HEREBY STATES:

1. The Qualification Statement contains accurate, factual and complete information.
2. (Name of Respondent) agree (agrees) to participate in good faith in the procurement process as described in the RFQ and to adhere to the NHCAC's procurement schedule.
3. (Name of Respondent) acknowledges (acknowledge) that all costs incurred by it (them) in connection with the preparation and submission of the Qualification Statement and any proposal prepared and submitted in response to the RFQ, or any negotiation which results there from shall be borne exclusively by the Respondent.
4. (Name of Respondent) hereby declares (declare) that the only persons participating in this Qualification Statement as Principals are named herein and that no person other than those herein mentioned has any participation in this Qualification Statement or in any contract to be entered into with respect thereto. Additional persons may subsequently be included as participating Principals, but only if acceptable to the NHCAC.
5. (Name of Respondent) declares that this Qualification Statement is made without connection with any other person, firm or parties who has submitted a Qualification Statement, except as expressly set forth below and that it has been prepared and has been submitted in good faith and without collusion or fraud.
6. (Name of Respondent) acknowledges and agrees that the NHCAC may modify, amend, suspend and/or terminate the procurement process (in its sole judgment). In any case, the NHCAC shall not have any liability to the Respondent for any

costs incurred by the Respondent with respect to the procurement activities described in this RFQ.

7. (Name of Respondent) acknowledges that any contract executed with respect to the provision of [insert services] must comply with all applicable affirmative action and similar laws. Respondent hereby agrees to take such actions as are required in order to comply with such applicable laws.

(Respondent shall sign and complete the space provided below. If a joint venture, appropriate officers of each company shall sign.)

(Signature of Chief Executive Officer)

_____ (Typed Name and Title) _____

_____ (Typed Name of Firm)* _____

Dated: _____

- If a joint venture, partnership or other formal organization is submitting a Qualification Statement, each participant shall execute this Letter of Intent.

Section VI

Certificate of Insurance

- A. Prior to the commencement of work, the successful Respondent shall provide and maintain in full force and effect during the term of the contract, or any extension thereof, insurance coverage for operations as follows:

1. Workers Compensation Employer	Workers Liability Compensation as per statutory requirements and Employers Liability with limits of at least 100/500/100
2. Comprehensive General Liability (Occurrence Form) for bodily injury, personal injury, or property damage including coverage for: a. XCU Hazards; b. Contractual liability for indemnification obligations of contract; c. Independent Contractors; d. Products Completed Operations; e. Broad Form Property Damage	\$500,000 each occurrence
3. Automobile Liability covering owned, non-owned and hired	\$500,000 each occurrence
4. Umbrella Liability Excess of above coverage	\$1 Million each occurrence/ annual aggregate (not applicable)
5. Professional Liability	\$1 Million each occurrence/ \$2 Million aggregate

- B. General Liability and Automobile Liability Insurance shall include the NHCAC, its commissions, boards, authorities, agents and employees as additional insured.
- C. All coverage shall be in the form acceptable to the NHCAC.
- D. The successful bidder shall ensure that insurance policies are endorsed to provide at least (30) thirty days written notice to the NHCAC prior to any material change or cancellation of coverage.
- E. The successful bidder, prior to commencing any work, shall submit a Certificate of Insurance to the NHCAC evidencing compliance to the above requirements.