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COOK COUNTY HEALTH (CCH)

REQUEST FOR PROPOSAL RFP# H23-0018

TITLE: HOUSING OUTREACH PROVIDERS FOR THE HOUSING AND HEALTH NAVIGATION PROGRAM

GENERAL DESCRIPTION: Cook County Health (“CCH”) seeks one or more vendors to engage/receive real-time referrals of people experiencing homelessness and housing instability who are patients of CCH hospitals and clinics to support clinically appropriate temporary and permanent housing placements for homeless patients after hospital discharge and increase the number of homeless patients that achieve stable housing.

DATE ISSUED: January 11, 2023

VENDOR QUESTIONS DUE DATE: January 20, 2023, by 2:00 P.M. CT.

RESPONSE/ PROPOSAL DUE DATE: February 10, 2023, by 2:00 P.M. CT.

PRE-PROPOSAL CONFERENCE /FIELD INSPECTION: None

Delivery of RFP must include the RFP Acknowledgement Form included at the end of this document.

All questions regarding this RFP should be directed to purchasing@cookcountyhhs.org

The RFP and related Addenda will be posted at the <http://www.cookcountyhealth.org> website under the “Doing Business with Cook County Health” tab.

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1. Hospital System Background with Housing Initiatives

The Cook County Health (CCH) is a unit within the Cook County government. CCH provides a full continuum of health care services through its seven operating entities, referred to as System Affiliates. System Affiliates provide a broad range of services from specialty and primary care to emergency, acute, outpatient, rehabilitation, and preventative care. CCH services are offered without regard to a patient’s economic status or ability to pay.

CCH operates John H. Stroger, Jr. Hospital of Cook County (JHSH), Provident Hospital of Cook County, and Ambulatory and Community Health Network (a system of fifteen clinics), the Cook County Department of Public Health, Cermak Health Services of Cook County (a health facility operated within the confines of the Cook County Department of Corrections), and the Ruth M. Rothstein Core Center. The System also operates County Care, a Medicaid managed care health plan for low-income adults established under the Affordable Care Act.

In 2018 Cook County Health created its Housing Department located in the Integrated Care unit. This Department has since moved to the Office of Diversity, Equity, and Inclusion in recognition that housing is a social determinant of health, and its access or lack thereof disproportionately impacts black and brown communities. The availability and promotion of affordable housing is an equity investment into communities across Cook County including Chicago. The Health System launched its major investments into housing and services specifically for people experiencing homelessness in 2019. CCH is a lead investor in the Flexible Housing Pool (FHP) and created the Medical Respite Center (MRC) in Oak Park. The Health System and Health plan also partner with community-based supportive housing providers to leverage state and federal housing assistance resources. Over 400 people have been served through CCH Housing programs

2. Purpose

a. Term of Services

The term of services shall be for a period thirty-six (36) months with one (1) one-year renewal option.

b. Basis of Award

The basis of award shall be to a single or multiple Proposers based on the highest rated Proposal offering the best value to CCH meeting the specifications, terms, and conditions in accordance with the evaluation criteria set forth in this RFP.

3. Schedule

CCH anticipates the following schedule.

Activity	Estimated Date
RFP posted to the website	January 11, 2023
Pre-Proposal and Site Visit	none
Proposer Inquiry Deadline	January 20, 2023, by 2:00 P.M. CT.
CCH response to Vendor Questions-Tentative	Week of January 23, 2023
Proposal Due Date	February 10, 2023, by 2:00 P.M. CT

4. Scope of Services

Cook County Health is the largest provider of health care for people experiencing homelessness in Cook County. CountyCare is the largest provider of managed care for people experiencing homelessness in Cook County. CCH data demonstrates it provides health services to 83% of the single adult homeless population in Chicago – over 4,800 persons each year. CCH is also serving over 1,000 detainees each year with severe behavioral health conditions and experiencing homelessness through Cermak Health Services at Cook County Jail. In addition to those identified as literally homeless within our systems of care, we know through patient surveys that over 40% of our patient population have problems with their housing stability.

In attending to these disparities and unmet needs, CCH is investing funding from the American Rescue Plan Act (ARPA) to expand the Medical Respite Center and Flexible Housing Pool, and initiate a new program called the Housing + Health Navigation Program (HNP). On a day-to-day basis, hospitals like Stroger and Provident struggle to find a safe place to discharge patients experiencing homelessness who still have a clinical care need. Unnecessary hospital days occur when there is no safe discharge, as shelters cannot accommodate persons who need wound care or home health care. Hospitals may push to send patients to a nursing home for post-discharge care because shelters are not able to take them. In one year, the MRC in Oak Park served over 100 people, 85% of whom came from Stroger Hospital. Over half had an endorsed substance use disorder, one-third reported a mental health condition. The most common medical necessity for respite was recovery from surgery most associated with frostbite and other traumatic wounds that result from living on the street. This demand necessitates a coordinated and holistic approach to identifying and connecting individuals to the right short and long-term interventions.

Cook County Health is using this Request for Proposals to identify one or more community-based organizations to serve as Housing Navigator Program partners, integrating with hospital and health clinic teams to manage referrals. Housing Navigation Services will be provided in the City of Chicago and across Cook County. Selected agencies will work on-site at Stroger and Provident Hospitals, as well as at various primary health clinics operated by CCH to be determined.

4.1 Eligible Respondents

This funding opportunity is a competitive process open to non-profit, for-profit, faith-based, and other privately-operated entities that currently provide supportive services, outreach, and/or housing assistance to people experiencing or at-risk of homelessness. Proposers may respond as a single entity or in a collaborative partnership as a lead entity. All partners must demonstrate experience and qualifications to deliver the program. The Proposers fiscal and organizational strength will be evaluated to meet the administrative requirements.

Individual agencies or subcontractors to lead agencies must be able to demonstrate a minimum 10 percent in-kind match. Administrative costs will be capped at 10 percent or the agency's federally approved indirect rate if applicable per application.

4.1.1 Program Overview and Requirements

The Cook County Health Housing + Health Navigators will work collectively to respond to homelessness and housing crises within the Health System in Chicago and Suburban Cook County. Approximately six (6) to eight (8) staff will be supported through this solicitation, who will work in teams across the county in facilities with a high number of patients experiencing housing insecurity. Each Navigator will serve approximately 75 people per year with housing triage, referral, placement, and housing identification. This will relieve challenges healthcare social workers have with understanding and navigating the housing systems and can then focus on linking to other clinical and social services.

CCH Housing + Health Navigators will also partner with the Chicago and Suburban Cook County Continuums of Care (CoC) for both the Coordinated Entry Systems and other Street Outreach and Navigation services networks. Unlike CoC Housing System Navigators, the CCH program expects its vendors to make connections to unassisted housing units, homelessness prevention/diversion resources, and support temporary/emergency housing placements if needed and maintain contact with the patient until the patient is deemed housing secure. If a person is matched to available housing, CCH HSNs will provide direct support with obtaining documentation, completion of applications, and other needs through the leasing process.

The Emergency Medicine Homelessness and Housing Navigator Program (HNP) staff will work collaboratively with CCH social work staff to identify people experiencing homelessness and housing instability including immediate crisis circumstances. It is expected that contracted agencies have the capacity to respond to a range of subpopulations including young adults, families with children, people with mental health and substance use, fleeing domestic violence or human trafficking, intellectual and developmental disabilities, and reentry populations. This initiative will integrate housing and homelessness expertise directly to the healthcare setting. HNs will triage housing needs, ensure quality and appropriate housing referrals/connections, facilitate access to emergency resources, and help people through the housing application process. The vision for this program is to move beyond general housing referrals and follow people until they have a stable housing plan. As such, HNs will carry a caseload of referrals, and each staff will serve at least 75 households per year.

The Proposer will be expected to perform the following functions:

- a. Work on and off-site at CCH system locations to partner with healthcare staff to support the homelessness response
- b. Receive real-time referrals of homeless and housing insecure patients for HNP services from hospitals, clinics, and Medical Respite Center in Oak Park
- c. Travel throughout the community to meet with referred patients and cultivate housing options
- d. Locate and engage with referred patients, including encouragement to pursue potential housing solutions
- e. Have the capacity to meet needs of various subpopulations including families, transition-aged youth, people with mental illness and behavioral health, reentry from prison and jail
- f. Identify short and long-term housing needs and complete appropriate homelessness prevention, diversion, and other coordinated entry processes

- g. Support patients in resolving the housing crisis through applications for financial assistance, conflict resolution, and/or creating a relocation plan to avoid homelessness
- h. Navigate community resources
- i. Identify and address housing barriers
- j. Advocate for patients with housing providers and other resources
- k. Accompany patients to appointments to obtain housing or other resources including scheduling and providing transportation to units for viewing and lease signing
- l. Determine if referred patients already have services assigned through the CoC or other programming and link with those agencies for continuity of care
- m. Assist with homelessness and/or disability documentation as needed, including coordinating with hospital staff for helpful documentation from healthcare professionals
- n. Decide and provide Housing Transition Funds or Homelessness Prevention assistance as available
- o. Track activities and outcomes for monthly reporting
- p. Programs will enter data into CCH-approved client tracking and outcomes reporting systems. This may include access to CCH client systems and/or into a Homeless Management Information Systems database and/or into a vendor-sponsored data system.

4.1.2 Locations Requirements

Agencies will detail in the application if they are serving Chicago, Suburban Cook County, or both. Agencies will receive spaces within Cook County Health hospitals and clinics to meet with patients as well.

4.2 Performance Requirements

Cook County Health will track program progress on a monthly and quarterly basis. This includes collecting referral outcomes, activity tracking, and demographic reporting on activities and outcomes. CCH will monitor a set of performance indicators that may include, but is not limited to:

- a. Outputs:
 - Patients referred for HNP receive at least one housing placement support
 - Medically fragile homeless persons enroll with CCH Housing Outreach and Navigation supports
- b. Outcome:
 - 50% of HNP clients improve housing stability
 - Decrease emergency room utilization for preventative care
 - Increase positive health outcomes for housing patients
 - Patients connected to Care Coordination or Primary Care Physician

5. Required Proposal Content

This RFP provides potential Proposers with sufficient information to enable a proposer to prepare and submit proposals. CCH is supplying a base of information to ensure uniformity of responses. It must be noted, however, that the guidelines should not be considered so rigid as to stifle the creativity of any Proposer responding.

This RFP also contains the instructions governing the submittal of a Proposal and the materials to be included therein, which must be met to be eligible for consideration. All Proposals must be complete as to the information requested in this RFP in order to be considered responsive and eligible for award. Proposers providing insufficient details will be deemed non-responsive. CCH expects all responses to reflect exceptional quality, reasonable cost and overall outstanding service.

Any page of a proposal that proposer asserts to contain confidential proprietary information such as trade secrets or proprietary financial information shall be clearly marked “CONFIDENTIAL PROPRIETARY INFORMATION” at the top of the page. Additionally, the specific portions of the page that are asserted to contain confidential proprietary information must be noted as such. However, note that ONLY pages that are legitimately confidential should be marked Confidential. CCH will return proposals that mark all pages Confidential or are copyrighted. All proposals submitted to CCH are the property of CCH.

Further, the proposer is hereby warned that any part of its proposal or any other material marked as confidential, proprietary, or trade secret, can only be protected to the extent permitted by Illinois Statute.

Proposals shall not contain claims or statements to which the proposer is not prepared to commit contractually. The information contained in the proposal shall be organized as described in this section.

5.1 Proposal Requirements

Proposal should include the following:

1. Administrative information (one page or less): Cover page including legal name of agency, contact person for this application, email address, phone, etc. The cover letter shall be signed by an authorized representative of the proposer and include the following:
 - a. Formal Legal Name
 - b. Address, City, State, Zip Code
 - c. Federal Employee Identification Number or Tax ID Number
 - d. Principals/Officers including: President, Chairman, Vice Presidents, Secretary, Chief Operating Officer, Chief Financial Officer
 - e. Business Background and Description of Current Operations
 - f. Number of Employees
 - g. Number of Years in Business
 - h. Total Number of Years Providing the Proposed Services
2. Interest and Capacity (two pages or less): Describe interest in this work and provide a brief description of your agency and its history, overall capacity, and relevant expertise and experience – especially related to healthcare and housing partnerships, as well as housing outreach.
3. Client References (one page or less):

Share three client references with phone and email information, including at least one highlighted in past performances.

5.2 Proposal Narrative Response

Proposers shall provide should include the following

1. Proposed Program:

- a. Clearly defines services to be provided and a process of working with the target population, health system staff, and housing resources
- b. Fully describes the needs of the target populations and addresses how the program will achieve the stated activities and outcomes. Specially speaks to capacity in working with mental health, substance use, reentry and probation, transition-aged youth, families.
- c. Discusses what challenges may arise in meeting the goals and objectives of the program and how the challenges will be addressed and mitigated.
- d. Completely describes subrecipient partners, if applicable. Including roles, communication, and coordination and reason for partnership
- e. Demonstrates how the program is supported by evidenced-based practices and/or other successful initiatives that use best practices
- f. The response details geographic accountability and coverage. The proposed program discusses specific geographies of need and agency capacity. If the proposal is segmenting the city or suburban cook county provides evidence for the need and
- g. Describes experience and capacity with homelessness prevention activities and working directly with landlords
- h. Describes how the agency will support a two-year program and demonstrate sustainability, cost-effectiveness, and impact on individuals and the hospital system
- i. Demonstrates and ability to facilitate crisis housing and shelter placements, short-term housing interventions, and finding affordable units in the community
- j. Articulates values and understanding of housing first approach, harm reduction, trauma informed care, and use of culturally competent, non-discriminatory, developmentally appropriate practices
- k. Demonstrated experience with healthcare systems

2. Performance Management and Outcomes:

- a. The Proposer documents performance of similar program, and/or documents performance of other housing-related grants and contracts
- b. The Proposer outlines agency achievements in working with the target populations
- c. The Proposer outlines its performance management processes to track and report activities and outcomes, store participant data, and describes the data systems that are used and how staff complete data entry

3. Organizational Capacity:

- a. The proposal documents and describes staff – existing and new hires – to carry out the proposed program, and details staff qualifications
- b. The proposal includes a clear organizational and supervisory chart that has qualified staff responsible for program oversight and management
- c. The Proposer outlines the process and staff assigned to monitor the program expenditures and fiscal controls, and reporting aligned with the ARPA requirements

- d. The Proposer describes its Human Resources capacity and hiring plan
- e. The Proposer has expertise working with the target population and has relevant capabilities and/or infrastructure needed to serve this group
- f. The Proposer’s staff and board reflects the target population and describes its processes to engage diverse populations and incorporate the voice of people directly impacted by housing instability and homelessness

4. Reasonable Costs, Budget Justification, and Leverage of Funds:

- a. The financial standing of the Proposer demonstrates fiscal capacity to manage the proposed program
- b. The Proposer leverages at least 10% of the requested funding amount from other sources as either cash or in-kind contributions to support total program and administrative cost (e.g., state, federal, foundation, corporate, individual donations)
- c. The Proposer’s request and budget are within the available funding and the budget supports the scope of work and work plan.

5.3 MBE/WBE Participation

The Proposer may be comprised of one or more firms as to assure the overall success of the project. The proposer must present a team chart that clearly identifies each team member and specify their role in the project (this should be more detailed than the information provided in the executive summary). For each subcontractor, provide the name of the firm(s), brief company background, level of participation, MBE or WBE if applicable, the type of services each resource, from each firm, will provide. For each MBE/WBE certified firm proposed, provide the appropriate information in the **MBE/WBE Utilization Forms, Attachment A.**

- A. It is the policy of the County of Cook to prevent discrimination in the award of or participation in County Contracts and to eliminate arbitrary barriers for participation in such Contracts by local businesses certified as a Minority Business Enterprise (MBE) and Women-owned Business Enterprise (WBE) as both prime and sub-contractors. In furtherance of this policy, the Cook County Board of Commissioners has adopted a Minority- and Women-owned Business Enterprise Ordinance (the "Ordinance") which establishes annual goals for MBE and WBE participation as outlined below:

Contract Type	Goals	
	MBE	WBE
Goods and Services	25%	10%
Construction	24%	10%
Professional Services	35% Overall	

- B. **The County may set contract-specific goals, based on the availability of MBEs and WBEs that are certified to provide commodities or services specified in this solicitation document. The MBE/WBE participation goals for each Contract are stated in the Special Conditions.** A Bid, Quotation, or Proposal shall be rejected if the County determines that it fails to comply with this General Condition in any way, including but not limited to: (i) failing to state an enforceable commitment to achieve for this contract the identified MBE/WBE Contract goals; or (ii) failing to include a Petition for Reduction/Waiver, which states that the goals for MBE/WBE participation are not attainable despite the Bidder or Proposer Good Faith Efforts,

and explains why. If a Bid, Quotation, or Proposal is rejected, then a new Bid, Quotation, or Proposal may be solicited if the public interest is served thereby.

Consistent with Cook County, Illinois Code of Ordinances (Article IV, Division 8, and Section 34-267), and CCH has established a goal that MBE/WBE firms retained as subcontractors receive a minimum 35% MBE/WBE of this procurement. **The Office of Contract Compliance has determined that the participation for this specific contract is 0% MWBE participation.**

The Proposer shall make good faith efforts to utilize MBE/WBE certified firms as subcontractors. In the event that the Proposer does not meet the MBE/WBE participation goal stated by CCH for this procurement, the proposer must nonetheless demonstrate that it undertook good faith efforts to satisfy the participation goal. Evidence of such efforts may include, but shall not be limited to, documentation demonstrating that the proposer made attempts to identify, contact, and solicit viable MBE/WBE firms for the services required, that certain MBE/WBE firms did not respond or declined to submit proposals for the work, or any other documentation that helps demonstrate good faith efforts. Failure by the proposer to provide the required documentation or otherwise demonstrate good faith efforts will be taken into consideration by CCH in its evaluation of the proposer's responsibility and responsiveness.

5.4 Financial Status

- A. Provide the audited summary financial statements for the last two fiscal years. State whether the proposer or its parent company has ever filed for bankruptcy or any form of Reorganization under the Bankruptcy Code, and, if so, the date and case number of the filing.
- B. State whether the proposer or its parent company has ever received any sanctions or is currently under investigation by any regulatory or governmental body.

5.5 Conflict of Interest

Provide information regarding any real or potential conflict of interest. Failure to address any potential conflict of interest upfront may be cause for rejection of the RFP.

If no conflicts of interest are identified, simply state “[Company X] has no conflict of interest.”

5.6 Contract

Sample Contract General Terms and Conditions are available in [Attachment C](#), CCH Sample Services Agreement. Execution of the Contract is not required at the time the qualifications are submitted. However, if the proposer disagrees with any Contract provisions, or is proposing alternate language, it shall include the language for consideration by submitting the proposed redlines on the sample Contract General Terms and Conditions document. CCH will not consider any exceptions or proposed alternate language to the Contract General Terms and Conditions if the proposer does not include these objections or alternate language with the proposal. CCH shall not be deemed to have accepted any requested exceptions by electing to engage a Proposer in negotiations of a possible Contract.

5.7 Legal Actions

Provide a list of any pending litigation in which the proposer may experience significant financial settlement and include a brief description of the reason for legal action.

If no Legal actions are identified, simply state “[Company X] has no pending legal actions in which our firm will experience any significant impact to this Contract.”

History of Legal Actions for the last 36 months:

Action	Date

5.8 Confidentiality of Information

The Selected proposer may have access to confidential information, including Protected Health Information (PHI) to perform the functions, activities, or services for, or on behalf of, CCH as specified in this RFP. The Proposer must acknowledge that if awarded there is a high likelihood that the selected proposer may have access to PHI, in paper or electronic form, and thus, it shall sign a Business Associate Agreement with CCH. As a Business Associate, the selected proposer will agree to comply with all federal and state confidentiality and security laws and regulations, including HIPAA, HITECH, the Medicaid Confidentiality Regulations, as defined herein, and all other applicable rules and regulations. The proposer must commit to require all staff, including drivers, Attendants, and other personnel, and Subcontractors to complete HIPAA training upon hire, and no less frequently than annually thereafter. CCH reserves the right to review and accept the training program prior to implementation, or require the selected proposer to use HIPAA materials or training sessions supplied by CCH.

5.9 Economic Disclosure Statement

Execute and submit the Economic Disclosure Statement (“EDS”). The EDS form can be found in Attachment B, Economic Disclosure Statement. The EDS must be submitted with the pricing proposal in a separate envelope.

5.10 Addenda

Since all Addenda become a part of the proposal, all Addenda must be signed by an authorized proposer representative and returned with the proposal. Failure to sign and return any and all Addenda acknowledgements shall be grounds for rejection of the proposal. Addenda issued prior to the proposal due date shall be made available via Cook County Health website: <http://www.cookcountyhealth.org/about-Cook County Health/doing-business-with-Cook County Health/>

6. Evaluation and Selection Process

An Evaluation Committee comprised of the CCH and County personnel will evaluate all responsive Proposals in accordance with the selection process detailed below.

6.1. Proposal Assessment

The Evaluation Committee will review all Submittals to ascertain that they are responsive to all submission requirements.

6.1.1 Proposal Evaluation

The RFP provides requirements and data, which will be used as a basis for a written presentation of qualifications of the firm(s) and proposed staff, project approach, systems

and methodologies for delivery of the Project. CCH will evaluate the Proposals to establish a list of qualified Proposer for Shortlist.

6.1.2. Shortlist Proposer Presentation

The Evaluation Committee, at its option, may invite one or more proposers to make presentations and/or demonstrations. The Evaluation Committee may request that all or a shortlisted group of proposers engage in proactive pricing feedback, submit clarifications, schedule a site visit of their premises (as appropriate), provide additional references, respond to questions, or consider alternative approaches.

6.2. Right to Inspect

CCH reserves the right to inspect and investigate thoroughly the establishment, facilities, equipment, business reputation, and other qualification of the proposer and any proposed subcontractors and to reject any RFP regardless of price if it shall be administratively determined that in CCH’s sole discretion the proposer is deficient in any of the essentials necessary to assure acceptable standards of performance. CCH reserves the right to continue this inspection procedure throughout the life of the Contract that may arise from this RFP.

6.3. Consideration for Contract

Any proposed contract including all negotiations shall be subject to review and approval of CCH management, CCH Legal and CCH’s Board of System Board. Proposed Contracts are also subject to review by the Cook County Office of Contract Compliance.

Following finalization of Contract documents to the satisfaction of CCH executive management, CCH shall secure appropriate reviews and may approve the proposed Contract for execution in its sole discretion. The identity of the successful proposer shall be posted on the website.

7. General Evaluation Criteria

7.1. Responsiveness of Proposal

The Proposal(s) will be reviewed for compliance with and adherence to all submittal requirements requested in this RFP. Proposal(s) which are incomplete and missing key components necessary to fully evaluate the RFP may, at the discretion of the Chief Procurement Officer or designee, be rejected from further consideration due to “Non-Responsiveness” and rated Non-Responsive.

Proposer must be compliant with all the submission requirements of the RFP. The evaluation committee will evaluate all responsive Proposal in accordance with the evaluation criteria detailed below.

7.2 Criteria Proposal

Proposals will be reviewed and selected based on qualifications of the Proposer to successfully perform the Services for the County throughout the course of the contract as evidenced by the following criteria:

Selection will be based on the following criteria. Note the point values for each criterion.

- A. Proposed Program: 30 Points**
- B. Performance management and outcomes: 30 Points**

C. Organizational capacity: 25 Points

D. Reasonable costs, budget justification, and leverage of funds: 15 points

In addition, the Evaluation Committee may review and consider the information and evidence Proposer’s responsiveness to the following categories:

1. MWBE Utilization Plan (EDS forms)
2. Conflict Interest
3. Insurance Requirements
4. Contract Terms and Conditions (objections and/or suggested alternate language)
5. Legal Actions

8. Instructions to Proposers

These instructions to proposers contain important RFP and should be reviewed carefully prior to submitting the Required RFP Content. Failure to adhere to the procedures set forth in these instructions, failure to provide positive acknowledgement that the proposers will provide all services and products or failure to provide acceptable alternatives to the specified requirements may lead to disqualification of the submitted RFP.

8.1. Questions and Inquiries

Questions regarding this RFP will be submitted in writing to the contact(s) email listed on the cover page of this RFP no later than the date stated in the [Schedule](#).

Question must be submitted in the following format, in **MS Excel**, and the subject of the email should reference the RFP#, Title and Proposer’s Name.

ID	Vendor Name	RFP Section	Question
1.			
2.			
3.			

Should any proposer have questions concerning conditions and specifications, or find discrepancies in or omissions in the specifications, or be in doubt as to their meaning, they should notify the Supply Chain Management Office via the email provided on the cover sheet no later than the date stated on the [Schedule](#) and obtain clarification prior to submitting a RFP. Such inquiries must reference the RFP due date and CCH RFP number.

8.2. Pre-RFP Conference (if Applicable)

CCH will hold a Pre-RFP conference call on the date, time, and location indicated on the cover page. Representatives of CCH will be present to answer any questions regarding the goods or services requested or RFP procedures. If a mandatory pre-RFP conference is required, the proposer must sign the pre-RFP conference or site inspection sheet and include a copy of this sign-in sheet in the response to the RFP.

8.3. Number of Copies

Proposers are required to submit one (1) original hard copy, and one (1) electronic copy (emailed to the email addressed on the cover page) and no later than the time and date indicated in the RFP.

NOTE: One (1) paper copy of the pricing proposal and one (1) EDS copy must be submitted separate from the rest of the response.

Each submission must then be separated as follows:

1. One (1) technical hard copy - the original - excluding Pricing and EDS forms;
2. One (1) Pricing and EDS hard copies in a separate envelope;
3. One (1) complete electronic response package (including excel pricing file and EDS) emailed to the email addresses on the cover page. The technical response must be a single electronic file (do not submit a file per RFP section). The email must clearly indicate the RFP Number and Title.

Please see the Proposal Receipt Acknowledgement form at the end of this file for the form required at delivery time.

8.4. Format

Hardcopies of the RFPs should be submitted in a separate envelope (or electronic file) except pricing which may be submitted in a separate envelop. Material should be organized following the order of the Required RFP Content Section separated by **labeled tabs**. Expensive paper and bindings are discouraged since no materials will be returned. **Numbered titles and pages are required.**

CCH reserves the right to waive minor variances.

8.5. Time for submission

RFP shall be submitted no later than the date and time indicated on the cover page of this RFP. **Late submittals will not be considered.**

8.6. Packaging and Labeling

The outside wrapping/envelope shall clearly indicate the RFP title, proposer's Name, proposers address, and point of contact RFP. **The Price RFP and EDS shall be submitted in a separate sealed envelope.** The envelope shall clearly identify the content as "Price RFP". All other submission requirements shall be included with the Technical RFP.

8.7. Timely delivery of RFP

The RFP(s) must be either delivered by hand or sent to CCH through U.S. Mail or other available courier services to the address shown on the cover sheet of this RFP. Include the RFP number on any package delivered or sent to CCH and on any correspondence related to the RFP. If using an express delivery service, the package must be delivered to the designated building and drop box. Packages delivered by express mail services to other locations might not be re-delivered in time to be considered. CCH assumes no responsibility for any RFP not so received.

8.8. Availability of Documents

CCH publishes competitive bid, RFP, and other procurement notices, as well as award RFP, at www.CookCountyheath.org under the "Doing Business with CCH" tab. Proposers intending to respond to any posted solicitation are encouraged to visit the web site above to ensure that they have received a complete and current set of documents.

8.9. Alteration/Modification of Original Documents

The proposer certifies that no alterations or modifications have been made to the original content of this Bid/RFP or other procurement documents (either text or graphics and whether transmitted electronically or hard copy in preparing this RFP). Any alternates or exceptions (whether to products, services, terms, conditions, or other procurement document subject matter) are apparent and clearly noted in the offered RFP. Proposer understands that failure to comply with this requirement may result in the RFP being disqualified and, if determined to be a deliberate attempt to misrepresent the RFP, may be considered as sufficient basis to suspend or debar the submitting party from consideration from future competitive procurement opportunities.

8.10. Cost of Proposer Response

All costs and expenses in responding to this RFP shall be borne solely by the proposer regardless of whether the proposer's RFP is eliminated or whether CCH selects to cancel the RFP or declines to pursue a Contract for any reason. The cost of attending any presentation or demonstration is solely the proposer's responsibility.

8.11. Proposer's Responsibility for Services Proposed

The proposer must thoroughly examine and read the entire RFP document. Failure of proposers fully to acquaint themselves with existing conditions or the amount of work involved will not be a basis for requesting extra compensation after the award of a Contract.

8.12. RFP Interpretation

Interpretation of the wording of this document shall be the responsibility of CCH and that interpretation shall be final.

8.13. Specifications and Special Conditions

The specifications in this document provide sufficient RFP for proposers to devise a plan and provide pricing. Minor variations from those specifications will be considered as long as proposers identify any instance in which their services specifications differ from those set forth in the RFP documents.

8.14. Errors and Omissions

The proposer is expected to comply with the true intent of this RFP taken as a whole and shall not avail itself of any errors or omission to the detriment of the services or CCH. Should the proposer suspect any error, omission, or discrepancy in the specifications or instructions, the proposer shall immediately notify CCH in writing, and CCH will issue written corrections or clarifications. The proposer is responsible for the contents of its RFP and for satisfying the requirements set forth in the RFP. Proposer will not be allowed to benefit from errors in the document that could have been reasonably discovered by the proposer in the process of putting the RFP together.

8.15. Proposal Material

The material submitted in response to the RFP becomes the property of CCH upon delivery to the Supply Chain Management Office and may become part of a Contract.

8.16. Confidentiality and Response Cost and Ownership

All information submitted in response to this RFP shall be confidential until CCH has executed a Contract with the successful proposer or has terminated the RFP process and determined that it will not reissue the RFP. **Any page of a Proposal that Proposer asserts to contain confidential**

proprietary information such as trade secrets or proprietary financial information shall be clearly marked “CONFIDENTIAL PROPRIETARY INFORMATION” at the top of the page. Additionally, the specific portions of a page that are asserted to contain confidential proprietary information must be noted as such. However, note that ONLY pages or specific information that are/is legitimately confidential should be marked Confidential and Proprietary. CCH will return proposals that mark all pages Confidential or are copyrighted. All proposals submitted to CCH are the property of CCH.

Further, the Proposer is on notice that any part of its Proposal or any other material marked as confidential, proprietary, or trade secret, can only be protected to the extent permitted by Illinois law, including but not limited to the Illinois Freedom of Information Act [5 ILCS 140 *et seq.*]

8.17. Awards

CCH may, at its discretion evaluate all responsive proposals. CCH reserves the right to make the award on an all or partial basis or split the award to multiple proposers based on the highest rated Proposer and best value to CCH meeting the specifications, terms and conditions in accordance with the evaluation criteria set for in this RFP. If a split award impacts the outcome of the project it must be so stated in the proposal.

8.18. CCH Rights

CCH reserves the right to reject any and all offers, to waive any informality in the offers and, unless otherwise specified by the proposer, to accept any item in the offer. CCH also reserves the right to accept or reject all or part of your RFP, in any combination that is in the best interest of CCH.

8.19. Cancellation of RFP; Requests for New or Updated Information

CCH, in its sole discretion, may cancel the RFP at any time and may elect to reissue the RFP later. CCH may also issue an Addendum modifying the RFP and may request supplemental RFP or updated or new RFP.

9. Definitions

“Abuse” means (i) a manner of operation that results in excessive or unreasonable costs to the Federal or State health care programs, generally used in conjunction with Fraud; or (ii) the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish, generally used in conjunction with Neglect.

“Addendum” or **“Addenda”** shall refer to a one or more documents posted to the website by which modifies this Request for Proposal or provides additional information.

“Appeal” means a request for review of a decision made by proposer with respect to an Action, the following definitions shall apply to this RFP:

“Board” or **“Cook County Health”** shall refer to the Board of Directors of the Cook County Health or Cook County Health and Hospitals System.

“Contract” shall mean a properly executed Contract that has been negotiated between CCH and a proposer for some or all of the Deliverables described in this RFP.

“Contractor(s)” and **“Selected Proposer”** shall mean the individuals, businesses, or entities that have submitted a Proposal and have negotiated a Contract that has been properly executed on behalf of the Contractor and CCH.

“County” shall mean the County of Cook, Illinois, a body politic and corporate.

“Deliverables” shall refer to the items, supplies, equipment, or services that will be provided pursuant to any Contract entered into as a result of this RFP.

“Fraud” means knowing and willful deception, or a reckless disregard of the facts, with the intent to receive an unauthorized benefit.

“General Conditions” shall mean the terms and conditions posted to the website. **“Proposal”** shall mean the document(s) submitted by Proposer(s) in response to this RFP that constitute a Proposer's offer to enter into contract with CCH under terms consistent with this RFP, subject to the negotiation of a contract and approval by the Board.

“Procurement Director” or **“System SCM Director”** shall mean the System Director of Supply Chain Management who serves as chief procurement officer for the CCH.

“Proposer(s)” shall mean the individuals or business entities, if any, submitting a Proposal in response to this RFP.

“Request for Proposals” or **“RFP”** shall refer to this solicitation of proposals by CCH that may lead to the negotiation of a Contract

10. List of Attachments

The following Attachments are included electronically to this RFP.

Proposer(s) may access the following attachments by 1) download and save this RFP file to a local drive and 2) open the RFP document using Adobe application, 3) expand the navigation pane (left of window) and click on the paper-clip icon.

1. Attachment A - MBE/WBE Utilization Plan

Respondent(s) may review the **MBE/WBE Special Conditions**, *file name* **CCH MWBE Utilization Forms.pdf**. Respondent's

2. Attachment B - Economic and Disclosures Statement

Respondent(s) may review Economic and Disclosures Statement, *file name* **CCH EDS Form.pdf**. Respondent's

3. Attachment C – CCH Sample Services Agreement

Respondent(s) may review a representative Sample Services Agreement, *file name* **CCH Sample Services Grant Fund Agreement 01102023.pdf**. Respondent's response to the CCH General Terms-Conditions is required at the time of RFQ submission.

11. RFP Receipt Acknowledgement Form

This acknowledgement of receipt should be signed by a representative of Supply Chain Management located at Stroger Hospital, 1969 W. Ogden Avenue, lower level (LL) Room 250A, Chicago IL, 60612.

The outside wrapping shall clearly indicate the RFP Number and Title, Proposer’s Name, Proposers Address, and Point of Contact RFP. **Prefill the first two lines prior to submission.**

Solicitation Number and Title: _____
Vendor Name: _____
Accepted By: _____
Date: _____
Time (if time machine is not available, hand write the time): _____ A.M _____ P.M

RFP shall be submitted no later than the date and time indicated on the cover page of the RFP. **Late submittals will not be considered.** **Proposers must cut this sheet in two. SCM will time-stamp top and bottom sections. SCM will keep one section and the proposer will keep the other section.**



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Time Stamp Here