NEW YORK STATE | Department of Health

REQUEST FOR QUOTE (RFQ)

Pharmacy Services for Helen Hayes Hospital

RFQ #: C042570
Issued: November 9, 2026

Designated Contact:

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1 Calendar of Events

RFQ C042570 – Pharmacy Services for Helen Hayes Hospital	
Event	**Date**
Issuance of Request for Quote	November 9, 2026
Deadline for Submission of Written Questions	No later than November 23, 2026 at 2:00 p.m. ET
Answers to Questions Posted	On or about December 8, 2026
Deadline for Submission of RFQ Response	No later than December 22, 2026 at 2:00 p.m. ET
Anticipated Contract Start Date	June 1, 2027

2 Background and Purpose

Background

The New York State Department of Health, Helen Hayes Hospital (NYSDOH HHH) is a 106-bed rehabilitation facility with an additional 25 beds assigned to a Skilled Nursing Facility (SNF) sub-acute unit, and a 24 Transitional Care bed unit located in Rockland County, Rt. 9W, West Haverstraw, New York 10993. The Hospital offers care and treatment to people of all ages with physical disabilities and chronic disabling diseases.

The Hospital provides services in the following specialties:

Stroke (CVA)
Cardiac
Medical Rehabilitation
Arthritis
Amputation
Neurology
Urology
Pulmonary
Spinal Cord Injury
Multiple Sclerosis
Brain Injury
Orthopedic
Osteoporosis
Parkinson's disease

The Hospital has an on-site Pharmacy and additionally, provides limited pharmacy services to outpatients.

Purpose

NYSDOH HHH is seeking to identify experienced, responsive vendors to provide quotes for Pharmacy Services.

The quotes obtained through this Request for Quote will be used by NYSDOH HHH to award one five (5) year contract to the vendor meeting all requirements.

3 Who Should Respond

This RFQ is seeking quotes from interested parties who meet the following specified minimum requirements:

- Bidder must have a minimum of five (5) years' experience managing hospital pharmacies.
- Bidder must have a minimum of five (5) contracts currently in place to provide comprehensive pharmacy management and operation services comparable in scope to those described in Section 4 in any setting.
- Bidder must provide references and contracts currently in effect using Attachment C. Provide firm names, addresses, contact names, telephone numbers, and email addresses.

4 Scope of Work

The Contractor must provide general Pharmacy Services (as described in Part A of this Section 4) and Clinical Pharmacy Services (as described in Part B of this Section 4), including all staffing required to operate the pharmacy located within Helen Hayes Hospital.

The Contractor must provide maintenance of patient profile records and all other services and equipment detailed in the following paragraphs. Service will be required for a total inpatient census of up to 155 patients at any time.

Office Supplies and Uniforms: Except for pre-packing materials for unit dosing of medication, the Contractor will be responsible for supplying all required office supplies, vials and other supplies, including lab/lapel coats and materials necessary to provide the services detailed in this RFQ.
Internet Access: The Hospital will provide internet access to pharmacy staff.
Telephone Link: The Contractor will provide its own telephone link with its central computer operations, if required. The Contractor will install and maintain a dedicated telephone line for

all incoming and outgoing telephone calls, except those that originate on the grounds of the Hospital.

A. Pharmacy Services:

The Contractor must comply with regulations and standards of the United States Pharmacopeia, including the standards outlined in the USP & Pharmaceutical Compounding – Sterile Preparations.

The Contractor must operate the pharmacy in such a manner as to be consistent with all pertinent Federal, State and Joint Commission Standards, as referenced below:

Medication Management and National Performance Goals – The Joint Commission
Joint Commission Public Standards

§405.17 – Pharmaceutical Services – Hospital – New York Codes, Rules and Regulations
Section 405.17 - Pharmaceutical services | New York Codes, Rules and Regulations

§415.18 – Pharmacy Services – Nursing Homes – New York Codes, Rules and Regulations
Section 415.18 - Pharmacy services | New York Codes, Rules and Regulations

§482.25 Pharmaceutical Services – Hospital – Centers for Medicare and Medicaid Services State Operations Manual
SOM Appendix A

§483.45 Pharmacy Services – Long-Term Care Facilities – Centers for Medicare and Medicaid Services State Operations Manual
SOM - Appendix PP

The Contractor will provide in-service trainings and meetings annually and on an as needed basis for all personnel who are prescribing or administering medication.

Tasks:

The staff provided by the Contractor must complete the following tasks regarding operation of the pharmacy:

1. The Contractor must stock the Hospital pharmacy with all necessary medications as required to fulfill initial stock at the start of contract and must maintain medication stock required to meet dispensing needs at all times throughout the term of the contract.

   The Contractor must order medication from an accredited pharmaceutical distributor, operate the pharmacy within the Hospital and dispense medication to the patients of the Hospital in either unit dose or self-medication form, as required by the Hospital.

   With the exception of controlled substances and flu vaccine, all other stock will remain the property of the Contractor, and not be billable to the Hospital, until it leaves the pharmacy as either floor stock or as a prescribed item. Controlled substances will become the property of the Hospital as soon as they are delivered to the Pharmacy. The Contractor must provide all controlled substances and maintain perpetual inventory control over the Hospital's stock of controlled substances.
   The Contractor must make any and all necessary arrangements to comply with all current or future state or federal regulations for bar coding medications.

New orders must be delivered to patients within the Hospital on the same or next day.

2. Provide a unit dose drug distribution wherein all possible oral and topical medications, both in liquid and solid form, are dispensed in unit dose packaging according to the following regulatory requirements.

    a. Each dose must be individually packaged and sealed in compliance with the Food and Drug Administration (FDA) packaging regulations, and identified with:
        - Name of drug - both trade name and generic name where applicable.
        - Strength of drug stated in metric system.
        - Name of manufacturer and/or distributor.
        - Lot number
        - Expiration date

    Link for the FDA regulations:
    Article 137, Pharmacy | Office of the Professions
    NYS Rules Of The Board Of Regents:Part 29

    b. All doses for each inpatient must be dispensed in patient cassette trays provided by the Hospital. Cassette trays are and will remain the property of the Hospital.
    c. The Contractor must maintain cleanliness of all patient trays and cassettes with complete cleaning and relabeling at least quarterly.
    d. Medication on each patient care unit must be stored in a cassette medication cart for a 24-hour patient cassette exchange presently in use by the Hospital.
    e. Cassettes containing an updated supply of medication for each patient must be delivered at least five (5) times weekly (52 weeks/year) and exchanged for the cassettes used on the previous delivery.
    f. Medications must be supplied in accordance with the Hospital's formulary. In addition, the Contractor will be required to provide non-formulary medications as prescribed. The Hospital may choose to assume at its own discretion the responsibility for acquisition of all intravenous (IV) base solutions and electrolytes. The Hospital may also choose to assume responsibility for acquisition of the influenza, pneumonia and covid vaccines.

3. Prepare IV medications as required, including large volume, small volume and hyperalimentation solutions. It is estimated that the average number of IV solutions prepared per month is approximately 785.

4. Compound IV medications in the pharmacy and maintain compounding area within the pharmacy.
    a. The Hospital will supply a laminar airflow hood or other ISO Class 5 environment in the pharmacy for preparing IV admixture or any sterile product that will not be used within 24 hours in compliance with Joint Commission standards.
    b. The Contractor must ensure that the barrier is cleaned, disinfected, monitored and maintained in compliance with Joint Commission standards.
    c. The Contractor must ensure that a beyond use date is placed on all IV medications.
    d. The Contractor must place special storage instructions on IV doses as appropriate.

5. Provide complete controlled substance service, including:
    a. Supply and storage of all controlled substances.
    b. Maintenance of all required controlled substance perpetual inventory records.
    c. Auditing of all nursing-controlled substance perpetual inventory records.
    d. Destruction in accordance with applicable state and federal codes.

6. The Contractor will maintain and replenish all drugs/narcotics to all Hospital emergency kits and code carts within the facility on a monthly basis. In addition, must maintain a log listing the expirations of all carts and kits within the facility.
   All emergency orders of drugs not in stock at the facility shall be obtained and provided by the vendor within three (3) hours of the request. In the event the drug cannot be obtained, the Pharmacist on-call must notify the Nursing Supervisor immediately.

7. Assure that every medication dispensed is in compliance with the prescriber's orders and is carefully reviewed for labeling information. When a drug is substituted, it must conform to the substitution rules of New York State and the Hospital which will be provided to the Contractor upon award.

8. Utilize the Electronic Medical Record Pharmacy module of the Hospital's Health Care Information System. The Hospital will provide orientation on the Electronic Medical Record platform and ensure the user is familiar in order to provide the following functions:
    a. Verify all orders entered into the Physician Order Management System (POM) of Meditech be verified with a Pharmacist to ensure the following:
        - Indication matches medication
        - Dose is appropriate for medication, indication, age, weight and renal function status of patient.
        - Patient has no history of allergy to the medication
        - No duplication of orders
        - No duplication of therapy
        - No drug interactions
        - Order is complete and does not contain dose instructions that contradict the entered directions
        - Protocol orders for insulin, Coumadin or other medications are complete and accurate
        - Taper orders utilize the correct strength to provide all doses
        - Laboratory values are in appropriate range for medication therapy.
        - Order does not contain unapproved abbreviations

9. The pharmacy staff must assist and train the medical and nursing staff in the use of POM as required.

10. The pharmacy staff must immediately alert medical staff of the Hospital to the following:
    a. Notify medical staff member of serious drug interactions
    b. Notify medical staff member of measures to avoid interaction where appropriate
    c. Notify medical staff member of need for monitoring where appropriate

11. Dispense Therapeutic or Community Re-Entry Day Pass medication in conventional child-proof prescription containers for those orders on which the Contractor receives at least 24 hours prior notice. Medication may be required in unit dose or bulk form but in either fashion must be labeled as per New York State law for outpatient prescription dispensing.

12. The Contractor must credit the Hospital, if appropriate, for any medications returned to the Pharmacy in sealed, reusable packaging including tablets, capsules, sealed ointments and creams, unopened liquids and unused injectable.

13. Contractor must maintain all necessary drug information texts and references at their expense.

14. Contractor must provide drug information to practitioners upon request at no additional charge.

15. The Contractor must monitor recall information:
    a. Monitor FDA, Wholesaler, and Manufacturer's notifications of recalled medications.
    b. Check order history to determine if any recalled medication has been purchased
    c. Check Pharmacy and Nursing Units, and other appropriate departments for recalled medication.
    d. Arrange for return or destruction of recalled medications.
    e. Send notification of recall to appropriate Hospital Departments and insure that replacement medications are provided.

16. The Contractor must inspect any medication brought in by patients that are to be used while they are at the Hospital:

    a. Ensure that the medication identified agrees with label.
    b. Ensure that the medication is in date.
    c. Ensure that the medication is not a professional sample.
    d. Ensure that the medication supplied agrees with order.
    e. Ensure that the medication is labeled with directions for use while at the Hospital.
    f. Contractor must reenter the order in the Meditech system so that a check can be run for drug interactions and duplications.
    g. The Contractor will ensure that medications that are brought in by patients and are not intended for use at the Hospital will be stored in the pharmacy until the patient is discharged or the family requests the medications.

17. Smart Pump Dictionary Maintenance: The Contractor must build and maintain dictionaries for all medications to be administered via IV pump by Guardrail, IV medication administration software included on all IV pumps provided by Helen Hayes Hospital and guide nurses in the programing of the pump as required.

B. Clinical Pharmacy Services:

Clinical Pharmacy is a patient-oriented practice that promotes and assures safe and rational drug therapy. The essence of Clinical Pharmacy is the application of drug knowledge to patient care, considering the patient's status and need to understand their drug therapy. The specific requirements may include the following. It will be the responsibility of the Contractor to determine the best plan of action to meet the clinical pharmacy requirements, working in concert with Hospital staff. The tasks below constitute the Clinical Pharmacist consultative services required which must be provided to Physicians and professional staff on an as needed basis.

Tasks:

1. Coordinate Pharmacy Quality Improvement program and Medical Staff Drug Utilization Evaluation (D.U.E.) Program
2. Develop specific drug use criteria with and on behalf of the medical staff and perform criteria-based drug utilization evaluations of important drugs, including antibiotics, consistent with Joint Commission standards. Prepare monthly summaries of the activities and present findings to the Pharmacy and Therapeutics (P&T) Committee.
3. Monitor the Quality Improvement activities of the Pharmacy's dispensing activities and report findings, monthly, to the Pharmacy and Therapeutics (P&T) Committee.
4. Coordinate with the Chairman of the Pharmacy and Therapeutics (P&T) committee all Pharmacy related Quality Improvement reporting.
5. Prepare Quality Improvement reports as necessary.
6. Revise the Quality Improvement program for the Pharmacy at least annually, or as necessary to maintain adherence with appropriate Joint Commission, New York State Department of Health, and other regulatory requirements.
7. Perform all clinical Hospital Quality Management (HQM) functions as required by the following currently approved HQM guidelines as set forth by the Hospital's P&T Committee:
    a. Formulary Development and Management: Establish and maintain a list of the recommended safe and effective pharmacologic agents for our patient population, based on current knowledge and the input of the medical staff.
    b. Adverse Drug Reaction Analysis: Develop a definition of significant adverse drug reactions, promote the identification and reporting of such reactions, and assess identified events for preventability and the need for education to prevent similar occurrences.
8. Participate in the implementation of corrective actions based on Quality Improvement activity findings.
9. Participate in dispensing, education and monitoring of facility patient self-medication program.
10. Assist Physicians in designing therapeutic drug regimens based on patient specific parameters.
11. Work with the treatments team to establish therapeutic goals and endpoints and determine the effect the drug regimen has on established goals.
12. Design therapeutic alternatives to current drug regimens.
13. Apply in depth knowledge of pharmaceuticals to design dosage regimens.
14. Provide information relating to the treatment of patients with chemical toxicity due to poisoning and severe overdoses.
15. Critically evaluate therapeutic drug literature:
    a. Provide Clinical Services, education, and drug information to health care providers about various drugs and their proper use
    b. Analyze patient medication and allergy histories to determine correlations
    c. Concurrent Drug Therapy Monitoring
    d. Systematic review of patient drug orders
    e. Evaluation of the appropriateness of drug regimens
    f. Drug Therapy Advising
    g. Perform formal and informal consultations, as required
16. Advise patients as requested on self-medication programs
17. Assist in providing student and health professional education, as required.
18. Monitor investigational drug use. Ensure compliance with existing facility policies and procedures.

19. Monitor adverse drug reactions and compile summary report for the P&T Committee of each event. Report findings to the P&T Committee, appropriate State and Federal agencies, and drug manufacturers, as necessary.
20. The Contractor must monitor anticoagulation use:
    a. Heparin:
        i. Monitor for compliance with Heparin protocol
        ii. Monitor for HIT
    b. Low Molecular Heparin – monitor for appropriateness of dose in regard to:
        i. Diagnosis
        ii. Renal function
        iii. Patient weight
    c. Coumadin:
        i. Monitor INR before dispensing dose
        ii. Monitor INR therapeutic target range
        iii. Monitor adherence for protocol for high INR values
        iv. Interpret protocol orders to determine correct dose
21. Direct Oral Anticoagulants.
22. Contractor shall record and prepare meeting minutes, prepare the agenda and schedule each meeting, quarterly, of the Pharmacy and Therapeutics (P&T) Committee.
23. Make recommendations to help ensure that the Hospital has met all appropriate standards under Joint Commission and the Public Health Law Article 28.
24. Formulary Management:
    1. Through the P&T Committee, oversee the revision of the formulary, upon implementation and at least annually, or as required. Prepares reports of proposed formulary changes and presents recommendations to the P&T Committee.
    2. Prepare clinical evaluations of new products being considered for the formulary, and present recommendations to the P&T committee, as required.
    3. Oversee compilation, printing and distribution of the formulary.
25. Make recommendations concerning the Pharmacy Policy and Procedures manual, as required. Draft revisions as required.
26. Review patient laboratory results, as necessary, as part of the Drug Utilization Evaluation process.

SNF and TCU: Provide all reviews and activities required by applicable federal and state regulations, and by any applicable organizations, for the 25-bed skilled nursing facility (SNF) and the 24-bed transitional care unit (TCU) operated by the HOSPITAL.

C. Staffing:

The Contractor will provide staffing of NYS licensed pharmacists, technicians and management personnel as required to perform all functions described in this RFQ, and other functions as are required to run a hospital pharmacy. The Contractor will assure that adequate staff is provided to cover the pharmacy during all hours of operation, including evenings and weekends as described in this RFQ. The Contractor must review patient census and adjust staffing to provide minimum required services described below based on patient volume. The Contractor must operate in compliance with state Board of Pharmacy and Drug Enforcement Agency (DEA) regulations, Centers of Medicare & Medicare Services (CMS) Conditions of Participation, and accreditation standards from the Joint Commission.

Pharmacy clinical staff must participate in in-person meetings, at least quarterly, at the Hospital's request, including, but not limited to:

- Infection Prevention Committee

- Pharmacy & Therapeutics Committee
- Department Head
- Environment of Care Committee
- Hospital Quality Management (HQM) Committee
- Skilled Nursing Facility (SNF) & Transitional Care Unit (TCU) Quality Assurance and Patient Safety Committee
- Hazardous Materials Subcommittee
- Emergency Management Subcommittee
- Institutional Review Board

The pharmacy must be staffed by the Contractor 365 days a year. Monday through Friday the hours of coverage will be 8:00am through 9:00pm. On weekends and holidays, the hours of coverage will be 8:00am through 4:30pm except for staffing coverage provided specifically as follows:

Christmas Eve 8:00am through 6:00pm
Christmas Day 8:00am through 12:00 noon
New Year's Eve 8:00am through 6:00pm
New Year's Day 8:00am through 12:00 noon
Thanksgiving Day 8:00am through 12:00 noon
Easter Sunday 8:00am through 12:00 noon

The Contractor must provide staffing meeting the requirements set forth in this RFQ, but must increase/decrease staffing should it prove necessary to meet changing workload requirements. In the event of a pandemic or emergency, if a staffing increase is indicated, the Contractor and the Hospital will negotiate an appropriate increase in the management fee. This increase would be based on salary, documented fringe and overhead cost. This increase would also require approval from the New York State Attorney General and the Office of the State Comptroller.

Night and Weekend Service:

1. The Contractor must provide night and weekend on-call service. The on-call Pharmacist must respond within one (1) hour of request. This will consist of at least an on-call Pharmacist with a telephone number, which Hospital staff can call to:
    a. Speak to a pharmacist to obtain required information about medications.

    AND

    b. Obtain medications not available in the Documed cabinet. It will be expected that the Contractor establishes a system so that these medications can be obtained from either local hospitals, local pharmacies, or the Contractor's own distribution areas. The Contractor will be expected to make all necessary calls to ensure medication is ready for pickup; the Hospital will perform all local pickups.

The Contractor must ensure that staff are trained and tested for competency in compliance with Joint Commission standards and testing requirements.

1. For clinical functions, it will be expected that the Contractor will provide, at minimum, an additional .75 FTE for a Licensed Clinical Informatics Pharmacist, responsible for building and maintaining order sets and protocols, ensuring alignment with regulatory and accreditation requirements, and serving as the liaison between pharmacy, IT and clinical staff.
2. For maintenance and continued implementation of the of the Meditech system, the Contractor will fill a NYS Licensed pharmacist position. This position is a separate

position that cannot be fulfilled by the full-time staff. This position may also be used as backup for vacations of other staff.

3. The Contractor must submit no later than sixty (60) days prior to the start of the Contract a detailed Staffing Plan showing all titles and job descriptions of all personnel performing services required of the Contractor under the Pharmacy Services Contract awarded pursuant to this RFQ..
4. The Hospital reserves the right to interview and approve all persons hired by the Contractor to perform on-site duty. The Hospital further reserves the right to request the termination of any employee or employees it deems unacceptable for any reason.

D. Reporting:

1. The Contractor must provide financial and drug reports on demand to the Hospital's internal auditing staff.
2. The Contractor will conduct monthly nursing station reviews, including code cart and emergency box inspections. Maintain permanent record of all such inspections on file in the Pharmacy. The number of stations can vary and need to remain compliant at all times.
3. The Contractor will prepare reports for the Infection Prevention Committee, the Pain Assessment and Management Committee, the Drug Diversion Committee, and the Anticoagulation and Antibiotic Stewardship Committee, and attend meetings as required. This includes:
    a. Quarterly summary of all antibiotic use
    b. Quarterly reports on restricted antibiotic use
    c. Ongoing Quality Improvement projects
    d. Quarterly reports related to opioid use and side effects.
    e. Other reports as requested by the Hospital to support the work of these committees
4. Clinical reports must be run daily and reviewed for any deficiencies found in:
    - IV to PO Conversion as soon as clinically indicated
    - Enoxaparin doses appropriate for renal function status, diagnosis, and patient's weight
    - Antibiotic Therapy
    - Medication appropriate for diagnosis
    - Medication therapy consistent with culture and sensitivity report
    - Dose appropriate with diagnosis
    - Dose appropriate with renal function ID approval obtained when needed
    - Laboratory Test values monitored from medication cart list for all appropriate medications, including:
        - LFTs monitored
        - LFTs for hepatotoxic medications
        - Renal Function appropriate for medication therapy
        - Serum potassium for Diuretic, ACE, ARB, and Bactrim therapy
        - Trough levels for Vancomycin and Aminoglycosides
        - INR monitored Coumadin dose is dispensed

E. Service Requirements:

1. The Contractor will provide the Hospital the use of a Documed cabinet, or equivalent to permit medical staff to obtain required formulary medications during evening, night and weekend hours if the pharmacy is closed. The contractor will be responsible for:
    a. The restocking of this cabinet

b. The removal of outdated medications
c. Inspections for expirations no less than monthly
d. Checking all orders from the Documed use in log book
e. Documenting appropriateness of Documed use in log
f. Entering charges for doses taken from the Documed

4.1 RFQ Response and Electronic Submission Requirements

The Cost Proposal documents must be received by the Department, no later than the Deadline for Submission of RFQ Response specified in Section 1. (Calendar of Events). Late bids will not be considered.

Attachment A-Pharmacy Top 100 Drugs, Attachment B-Cost Proposal, and Attachment C-References, must be completed in full and received electronically by the Department's email, HHHBidrequest@helenhayeshosp.org. with the Subject Line: "RFQ #C042570 Pharmacy Services", by the Request for Quote Response Deadline date and time listed in Section 1. (Calendar of Events).

All electronic quote submissions should be clear and include page numbers on the bottom of each page. NOTE: Bidders should request a receipt containing the time and date received. Submission of quotes in a manner other than as described in these instructions (e.g., fax) will not be accepted.

In the event an electronic submission cannot be read by the Department, the Department reserves the right to request a hard copy and/or electronic resubmission of any unreadable files. The Bidder shall have two (2) business days to respond to such requests and must certify the resubmission is identical to the original submission. Hardcopy will prevail.

Electronic Submission

Email Subject Line: <Bidder Name>, RFQ # C042570 Pharmacy Services for Helen Hayes Hospital

Email PDF Submission Instructions:

1. All electronic quote submissions should be in PDF Optical Character Recognition (OCR) searchable format.
2. A font size of eleven (11) points or larger should be used. All submitted documents should contain appropriate header and footer information.
3. Where signatures are required, the quotes should have a handwritten signature (wet ink) and be signed in blue ink. A scan of the handwritten (wet ink) signature can be used for electronic submission in the PDF. The Department reserves the right to request hard copy originals of all signature pages at any time.
4. Marketing brochures, user manuals or other materials are not desired and will not be reviewed or evaluated. In order for the Department to evaluate bids fairly and completely, all Quotes should follow the format described in this RFQ and provide all requested information and no extraneous or additional information or material.

4.2 Questions

Any questions concerning this RFQ must be emailed to: HHHBidrequest@helenhayeshosp.org by the date and time specified as the Deadline for Submission of Questions specified in **Section 1.** (Calendar of Events), with the subject line "RFQ #C042570 Pharmacy Services"

Questions and answers to all questions will be compiled and shared publicly on the Department's website as well as distributed to all vendors that have either submitted questions or registered their interest in the RFQ.

Any amendments the Department makes to this RFQ as a result of questions and answers, if applicable, will be publicized on the Department's website as well as distributed to all vendors that have either submitted questions or registered their interest in the RFQ.

5 Review Process

Responses received on or before the due date listed in **Section 1.** (Calendar of Events) will be reviewed by the Department. The Department is under no obligation to use or return any information or material submitted in response to this RFQ. Further, the Department is under no obligation to inform any responders as to the outcome of the review of responses submitted to this RFQ.

5.1 Responder Submission Clarifications

The Department may ask responders to clarify the contents of their quote submissions. Other than to provide such information as may be requested by the Department, responders will not be permitted to alter responses or add information after the Deadline for Submission of Quotes listed in **Section 1.** (Calendar of Events).

5.2 Reserved Rights

With regard to reviewing vendor responses received for this RFQ, the Department reserves the right to:

1. Reject any or all responses received to this RFQ;
2. Withdraw the RFQ at any time, at sole discretion of the Department;
3. Contact responders to this RFQ to obtain clarification or additional information;
4. Request to meet with vendors.

6 Method of Award

At the discretion of the Department, all Bids may be rejected. The Department will award one contract as described in this RFQ based on best value to the responsible and responsive Bidder with completed Attachments A, B and C. In the event of two or more Bidders offering identical bid prices, the tied bidders will be given the opportunity to provide their best and final bid price to the Department, and, after evaluation of these revised bids, the award will then be made to the lowest bidder.

The Evaluation Committee will submit to the Commissioner a recommendation for award to the responsible and responsive Bidder with the lowest total bid. The Department will notify the awarded Bidder and Bidders not awarded. The awarded Bidder will enter into a written Agreement substantially in accordance with the terms of Attachment 8, DOH Agreement, to provide the required services or commodities as specified in this RFQ. The resultant contract shall not be binding until fully executed and approved by the New York State Office of the Attorney General and the Office of the State Comptroller.

7 General Terms

7.1 New York State Standard Contract-Attachment 8

The Bidder must review, and is requested to have its legal counsel review, Attachment 8, the DOH Agreement (Standard Contract), as the successful Bidder must be willing to enter into the Contract awarded pursuant to this RFQ in the terms of Attachment 8, subject only to any amendments to the Standard Contract agreed by the Department during the Question-and-Answer Phase of this RFQ. Please note that this RFQ and the awarded Bidder's completed Attachments A, B, and C will become part of the Contract as Appendix C.

It should be noted that Appendix A of Attachment 8, "Standard Clauses for New York State Contracts", contains important information, terms and conditions related to the Contract to be entered into as a result of this RFQ and will be incorporated, without change or amendment, into the Contract entered into between the Department and the successful Bidder. By submitting a response to this RFQ, the Bidder agrees to comply with all the provisions of the Contract, including all of the provisions of Appendix A.

7.2 Reimbursement

Payment of invoices submitted by the successful Bidder pursuant to the terms of the Contract entered into pursuant to this RFQ by the Department shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be:

If awarded a contract, the Contractor shall submit detailed monthly invoices on such forms and in such detail as the Department may require.

Bidder shall submit invoices electronically with the contract number clearly indicated to: ap@helenhayeshosp.org.

7.3 Freedom of Information Law (FOIL)

Any content that is proprietary and/or confidential should be marked as such in the response. Failure to mark content as proprietary and/or confidential may result in its disclosure in the event a response is the subject of a Freedom of Information request under Public Officers Law Section 87.