

Request for Proposals (RFP)

To : Offerors

From : Institute of International Education, Inc. (IIE)

Subject : Selection of Preferred Vendors for Medical Form Review

RFP Issue Date : 03/23/2023 RFP Closing Date : 04/07/2023

RFP Closing Time : 1700 hours US Eastern Time
Performance Period : October 2023 – September 2024

Enclosed is a Request for Proposals (RFP). IIE invites qualified firms, organizations and individuals ("Offerors") to submit a best-value proposal for the requested services. The Contract resulting from this award will be a **USG-Funded Consultant Agreement** serving the below mentioned program.

Offerors are encouraged to read this RFP in its entirety (including any and all attachments), paying specific attention to the instructions and requirements included herein. Issuance of this solicitation does not, in any way, obligate the Institute of International Education (IIE) to award a contract, nor will IIE pay for any costs incurred in the preparation and submission of a proposal. The agreement resulting from this RFP will be provided to the most responsive Offeror(s) whose Offer will be the most advantageous to IIE in terms of cost, functionality, and other factors as specified in this RFP.

The required services are described in the "Statement of Work" in Attachment A. IIE encourages your organization to indicate its interest in this RFP by submitting a proposal according to the instructions in "Proposal Preparation Instruction". Proposals will be evaluated based on the "Evaluation Criteria.

All proposals are due by the dates and times stated above. Any proposal received after the required time and date specified for receipt shall be considered late and non-responsive. Late proposals will not be evaluated.

Questions: Any questions are to be submitted **in writing** via email to the email address listed below no later than **March 29, 2023**. No questions will be entertained if they are received by means other than the specified email address. No oral answers will be provided. Answers to questions IIE deems relevant to this RFP will be published on **March 31, 2023.** IIE's website under Subawards and Procurement (https://www.iie.org/Work-With-Us/Subawards-Procurements).

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Version 2- February 2, 2018

Proposal Submission: Proposals, including any attachments (limited to 6MB), should be sent electronically in PDF format to: mmccaffrey@iie.org. Be sure to include in the subject line: Selection of Preferred Vendors for Medical Form Review IIE will not accept proposals received by fax.

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SECTION 1: BACKGROUND AND PURPOSE

Background: Institute of International Education

The Institute of International Education ("IIE" or the "Institute") is a New York not-for-profit corporation that is among the world's largest and most experienced international education and training organizations. Founded in 1919, IIE promotes educational exchange around the world through a wealth of programs and services including Fellowship and Scholarship Management, Higher Education Institutional Development, Emergency Student and Scholar Assistance, and Leadership Development.

For more than 100 years, IIE has promoted educational exchange around the world. The Institute currently implements more than 200 programs benefiting 40,000 participants from 183 countries. Foremost among these programs is the world-renowned Fulbright Program, which IIE has had the honor to administer on behalf of the U.S. Department of State since the program's inception in 1946. In addition to the U.S. Department of State, program sponsors include: the U.S. Agency for International Development (USAID); World Bank; major philanthropic foundations; private and public corporations; foreign governments; and individuals.

With IIE's global headquarters in New York City, IIE has offices around the world, including offices in the United States (Washington D.C., Chicago, Denver, Houston and San Francisco) and in other countries (China, Egypt, Ethiopia, Hungary, India, Indonesia, Mexico, Russia, Thailand, Ukraine, and Vietnam).

Purpose of Request for Proposal

The purpose of this Request for Proposal ("RFP") is to invite qualified individuals and organizations to submit a proposal for Selection of Preferred Vendors for Medical Form Review outlined more fully in Attachment A.

SECTION 2: RFP CONDITIONS

IIE reserves the right to:

- Reject any or all offers and discontinue this RFP process without obligation or liability to any potential Offeror or other party.
- Accept other than the lowest price offered.
- Award a contract on the basis of initial offers received, without discussions or requests for best and final
 offers.
- Award more than one contract.

Nothing in this RFP is, or should be relied on by Offeror as a promise or representation by IIE. IIE does not make any representation or warranty as to the completeness of this RFP or have any liability for any representations (express or implied) contained in, or omissions from, this RFP. This RFP and any replies to any written notifications are transmitted to the Offeror solely for the purposes of the Offeror preparing and submitting a Proposal. Each Offeror shall keep the RFP and its contents confidential and shall return the RFP (without keeping copies) to IIE if the Offeror elects not to submit a proposal, or upon being requested to do so by IIE.

Any information or materials submitted in response to this RFP and/or as a proposal (whether successful or unsuccessful) shall become the property of IIE and will not be returned.

In submitting a proposal, you must agree that your offer shall remain firm for a period of no less than **120** days from the RFP closing date.

Failure to follow the specifications and requirements provided in this RFP may result in disqualification.

The successful Offeror will be obligated to enter into an agreement containing the same or substantially similar terms and conditions found at https://www.iie.org/Work-With-Us/Subawards-Procurements/Solicitations-for-

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Consultants. The IIE terms and conditions may be changed, added to, deleted or modified by IIE prior to awarding the agreement. Other terms and conditions may be negotiated between IIE and the successful Offeror, at IIE's discretion. State Universities and Agencies should not expect or ask IIE to modify its Terms and Conditions to incorporate any State Regulations or Statutes.

SECTION 3: PROPOSAL PREPARATION INSTRUCTIONS

Proposals are expected to be comprehensive and include the information set forth below. Offerors are also invited to send any additional information or supplemental material they believe will aid IIE in properly evaluating their service offerings. Please be sure to respond to each of the elements requested and frame your answers in direct response to the information being sought.

Include only your own work and no text copied from sources outside of your organization, unless those sources are adequately cited and credited. In order to be qualified for this RFP, all Offerors are requested to provide the following information, and format their proposal as follows:

1. Letter of transmittal, one page

2. Basic information, one page

- Legal name, registered address, and "Remit to" mailing address, if different from registered address
- Name of authorized representative for this RFP, with telephone number(s), and e-mail address
- General information about your organization and the services it offers

3. Qualifications and Capabilities

- Brief description of the organization/entity and experience in the field that illustrates overall services and capabilities to meet the terms of the RFP
- Years of relevant experience
- Any plans to outsource/subcontract the services or any part thereof

4. Past Performance and Experience

Document and summarize your proven track record of successfully implementing similar activities. Using the table format provided below, please list only the relevant projects you implemented within the past 3 years, a brief description of how each is relevant to the scope of the RFP, and the contact details for each previous client or donor. You may also include recommendation/appreciation letters and certificates.

| # | (a) Name of Organization | (b) Activity Title | (c) Locations of activity | (d) Synopsis of the activity and relevance to this RFP | (e) Performance period (date and duration) | (f) Cost for the activity | (g) Name & Contact Info (E-mail <u>and</u> phone) |
|---|--------------------------------|-----------------------|---------------------------------|---|--|------------------------------------|---|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |

5. Implementation of the Statement of Work

- Detailed description of the services being offered and any information relevant to meeting the technical specifications stated in **Attachment A**
- Methodology, and reasoning behind the methodology chosen
- Quality control plan including:
 - o A description of internal review procedures that facilitate high-quality standards
 - o How quality control will be managed when completing multiple projects for multiple clients

• Exceptions to the RFP, additional or different ideas, in the statement of work and other requirements should be expressly noted

6. Cost Proposal

- Submit a detailed cost proposal, in U.S. dollars, in the recommended format shown in Attachment B
- Include any additional cost items that the Offeror wishes to propose
- Total cost proposed

SECTION 4: TERMS OF PAYMENT

Payment terms for the award shall be approximately net thirty (30) days after satisfactory completion of each deliverable or milestone agreed upon and established in the resulting agreement. Payment shall be made by the Institute of International Education ("IIE") via check or electronic funds transfer/bank wire. The final payment terms in the contract will control, not this RFP. No advance payments will be provided.

SECTION 5: EVALUATION OF PROPOSALS

| Item | Requirement | Maximum Length | Points Available |
|------------------------------------|---|-------------------|------------------|
| Qualifications and Capabilities | Assessment of the Offeror's qualifications and capacity to complete the scope of work, including evidence of program staff members' ability to provide support to the team in meeting their professional goals. | | 20 points |
| | Staffing plan for this activity and a general overview of the expertise of the individuals included. | | |
| | Higher scores will be awarded to methodologies that indicate a | | |
| | greater practical understanding of implementing the work, and more innovative but realistic ways of carrying out the work. | | |
| Methodology | Considering the Statement of Work in Attachment A, please describe in detail the following: | | 20 points |
| | The steps, in chronological order, that you will take to implement the work. Make sure to describe any innovative approaches or technology you plan to use. | | |
| | b) Why you chose the methodology: make sure to mention similar projects you implemented in the past and lessons you learned from them. | | |
| | Higher scores will be awarded to methodologies that indicate a greater practical understanding of implementing the work, and more innovative but realistic ways of carrying out the work. | | |
| Experience and References | Demonstrated past experience implementing a similar scope of work. Assessment of reference responses. | | 20 points |
| Implementation of | | | 20 points |

| the Scope of Work | Assessment of proposed approach to completing the scope of work, including project timeline and proposed platform capabilities. | |
|-------------------|--|------------|
| | Higher scores will be awarded to methodologies that indicate a greater practical understanding of implementing the work, and more innovative but realistic ways of carrying out the work. | |
| Cost Proposal | IIE's review of the cost proposal shall determine if the overall costs proposed are realistic for the work to be performed, reflect a correct understanding of the project requirements, and are consistent with the Offeror's technical proposal. | 20 points |
| | Total | 100 points |

SECTION 6: ANNUAL RENEWAL:

Annual Renewal: Selection(s) may be renewed annually, at IIE's sole discretion, for up to five years before recompetition. IIE reserves the right to exercise any one of the following options:

- Accept the updated proposal if changes are reasonable and within the scope of the original selection;
- Negotiate any updates/changes; or,
- Decide not to renew.

ATTACHMENT A STATEMENT OF WORK

Acceptance into an international exchange program including the Fulbright and the Hubert H. Humphrey Fellowship Programs, whether for a U.S. or international participant, is contingent on receipt of medical clearance. Therefore, the role of the Consultant is critical to a smooth review and acceptance process. IIE collects the medical form as part of the pre-departure process before participants travel to their program countries.

Being medically fit for the program means that the participant is physically, psychologically, and emotionally able to study, teach, or conduct research in the program country for the entire program duration. Additionally, medical fitness implies that a participant is physically and mentally capable of dealing with the challenges that may be encountered in the country to which they are going for the grant period. The review serves to document any existing medical conditions that may require continued monitoring and/or care. For some participants, the tuberculosis (TB) test is a very important part of the review, so the review serves to ensure that the participant is not actively infectious. The medical form also documents the vaccination history which may be required by host universities (vaccination history is not required for medical clearance).

The Consultant will review the participants' medical history to understand if:

- There are any current or past medical issues, in particular, chronic illnesses and their treatment.
- The participant has been appropriately immunized based upon standards outlined in the medical form.
- The questions on the medical form have been adequately answered, including whether the date of the exam is within 6-12 months of likely arrival to the U.S. or travel abroad to the host country.
- The answers provided, including any diagnosis, have been provided by a licensed physician (with an evaluating signature and stamp).
- The participant can successfully participate in and execute their authorized activities.

The Consultant will review the participants' medical history looking for the following:

- Physical health
 - Disabilities
 - Chronic diseases and conditions
 - Hospitalizations
 - o Injuries
 - Allergies
 - Prescriptions
- Mental health
 - Counseling/therapy sessions
 - o Diagnosed mental disorders and/or conditions
 - Prescriptions
 - Hospitalizations

Process/Requirement

- The submission of medical history and the review shall be electronic. Participants complete the selfreporting section of the form.
- Participants' physicians complete the physician's section of the form within the allotted time frame.
- Participants submit the completed form electronically.
- The Consultant shall access and review medical forms electronically.
- The Consultant shall review the form and provide one of the following designations:
 - Clears the participants (approx. 95%)

- Clears them conditionally (notes that they can participate in program if, for example, they stay on medication, reside near a hospital, medical facility, etc., maintain contact with therapist/counselor, postpone participation, etc. (approx. 5%)
- Returns form for clarification (approx. 3%)
- Denies clearance (less than 1%)

The percentages of clearance designations represent averages of medical clearances from January 2018 through January 2023. These numbers add up to more than 100% as they are not mutually exclusive categories -- any form that is returned for clarification will later end up in one of the other three categories.

Number of applications that the Consultant will review annually

• There are approximately 3,400 to 4,400 medical forms for review each calendar year. Forms are reviewed throughout the year with a majority reviewed in late spring and early summer (peak period of May-July).

Review Turnaround

• The Consultant will review the medical forms within two weeks from the date they are made available with the understanding that routine reviews typically occur within one week. The Consultant will perform urgent reviews within 48 hours. IIE will communicate with the Consultant via email or phone in the case of the need for an urgent review.

Use of Backup Reviewers

• The Consultant may seek the assistance of other qualified physicians to aid with reviews during times of vacation, absence, or to meet turnaround deadlines. The Consultant will implement a quality assurance process to ensure that reviews meet standards. The Consultant will let IIE know when backup reviewers will be utilized and will submit their resumes in advance, if not included in the initial proposal.

Review System

• IIE uses an online system to conduct reviews. IIE will provide the Consultant with a login and instructions on how to use the system. The Consultant will be able to use the system to access the medical form, indicate the clearance decision, and provide any comments. In the event of a system failure or lapse in service, alternate methods may be used to transmit medical forms including encrypted emails, faxes, and hardcopy mailing.

Quality Improvement

If deemed a priority, IIE will work with the Consultant to develop and implement a quality improvement
process to capture efficiencies and/or student trends in the medical clearance process. The Consultant
will meet with IIE and U.S. Department of State representatives three to four times per year to discuss the
current process, and make recommendations based on recent trends or areas for suggested
improvements.

ATTACHMENT B COST PROPOSAL TEMPLATE

Submit a detailed, budget for the services described in the technical proposal. IIE's review of the cost proposal shall determine if the overall costs proposed are: realistic for the work to be performed, reflect a correct understanding of the project requirements, and are consistent with the Offeror's Technical Proposal.

The following is a format may be used as a guide to assist you in the preparation of the cost proposal. You may submit the cost proposal using this form or in the format of your choice (plain sheets, your own form, or a variation of this form). The Offeror may list any cost line items, but it is recommended that the Offeror follow the major categories listed below, breaking down all "lump sum" items as much as reasonably possible.

| Item No. | Description | Quantity | Unit (hours/days) | Unit Price (USD) | Total Price |
|-------------|-------------|----------|-------------------|------------------|-------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |