

Township of North Bergen
4233 Kennedy Boulevard
North Bergen, NJ 07047
201-392-2027

Request for Qualifications
Group Eye Care Program for Township Employees-RFQ #2012-06

Sealed Submissions must be delivered to the address stated above, prior to the time and date listed as the public opening. **The RFQ # and Attn: Robert J. Pittfield must be clearly written on the outside of the envelope. Please submit 1 original and 1 copy of proposal.**

Scope of Services:

The Group Eye Care Program Service shall cover approximately 300 Township employees, excluding Police and Fire unions. The service shall cover the insured employee, spouse and their dependent children under 19 years of age and dependent children under 23 years of age who qualify as full-time students. Eye examinations must be performed by an independent Doctor of Optometry located within the same building. The Optometrist must be available, at a minimum, on a daily basis five (5) out of six (6) days per week. One examination per year must include: glaucoma testing, muscle balance test, color vision testing, tonometry, refraction and external inspection for pathology and abnormalities. Eye glass availability must include: a selection from at least (50) frames that will be provided at no cost to the employee (one per year). Please submit a list of frames provided, including a selection of, at a minimum, twenty-five (25) metal frames. Eye glass lenses available should be: prescription plastic lenses, single vision, bifocal or trifocal. The tints of such lenses must be solid or gradient. Should patient choose a more expensive frame, an \$80.00 allowance off advertised price will be credited toward the better frame. Contact lenses shall be provided at: one (1) pair per year and three (3) months supply of bi-weekly disposable (AcuVue 2); if member must upgrade quality of contact lenses a 10% discount will be offered. Any add-ons, such as no line bifocals, transitional lens, ultrathin lens and anti reflective coating are not included in the plan and will be offered at a 15% discount. Any specialty contact lens orders will be charged the provider's regular price. 24-hours notice must be given on any appointment cancellations. The most current technological equipment and standards must be utilized throughout the term of this contract and demonstrated upon request by the Township Purchasing Agent. The Township will pay \$115 per employee, per year in quarterly installments. Adjustments shall be periodically made for changes in the number of employees. Please refer to plan summary of benefits listed below.

VISION CARE PLAN SUMMARY OF BENEFITS

SUMMARY	COST TO MEMBER
Eye examination (see details)	None
All ranges of prescriptions (includes single vision, bifocal or trifocal)	None
Frame collection of 50 including 25 metal and 25 plastic	None
Lens tints are solid or gradient scratch resistance	None
Premium frames	\$80 Allowance Township Total
No line Bifocals	15% discount
Transitional lenses	15% discount
Ultra thin lenses	15% discount
Anti-reflective coating	15% discount
Polycarbonate lenses (for dependent children)	None

Ultraviolet coating	None
<p><i>Contact lenses:</i> Three months supply of bi-weekly disposable Acuvue 2; if member must upgrade quality of contact lenses a 10% discount will be offered.</p>	
<p><i>Vision Care Plan Exclusions:</i> Coverage is limited to routine eye examinations and eyewear and there are no applicable pre-existing condition exclusions. Covered expenses will not include:</p> <ul style="list-style-type: none"> • Medical treatment of eye disease or injury • Visual therapy • Special lenses or coatings other than those described in this summary (e.g., pinnacle lenses) • Replacement of lost/stolen eyewear • Non-prescription lenses • Two pairs of eyeglasses in lieu of bifocals • Services not performed by licensed personnel • Prosthetic devices and services • Materials and services not specified • Insurance of contact lenses 	

Qualifications will be evaluated by the Township of North Bergen on the basis of the most advantageous and other factors considered. The evaluation will consider:

1. Credentials, experience and reputation in the field. Provider must be duly licensed and authorized by the State of New Jersey to administer optical services. Qualifications must include the advanced professional degrees necessary to fulfill the above scope of services. Resumes of all professionals and employees involved in providing the services stated above must be submitted.
2. Knowledge of the Township of North Bergen and experience in New Jersey municipal employee group eye care programs. Submissions must clearly demonstrate and substantiate such.
3. Ability to address, complete and facilitate all items stated in the above scope of services.
4. Availability to accommodate any required meetings of the Township.
5. Other factors to be demonstrated to be in the best interest of the Township of North Bergen.

This contract will be awarded beginning March 1, 2012 through December 31, 2012. The Township of North Bergen reserves the right to reject any and or all responses.

Please include a copy of your NJ Business Registration Certificate and documentation of required Affirmative Action. Required affirmative action documentation includes one of the following:

- 1) A letter from the U.S. Department of Labor that the contractor has an existing federally approved or sanctioned Affirmative Action Program.
- OR
- 2) A Certificate of Employee Information Report Approval.
- OR
- 3) An Affirmative Action Employee Information Report (Form AA302).

The public opening will be held in the Municipal Chambers of the Township of North Bergen located at 4233 Kennedy Boulevard, North Bergen, NJ, on Wednesday, February 22, 2012 at 10:30am.

RFQ # NB 2012-06

Robert J. Pittfield
Chief Financial Officer