

**CONTRACT DOCUMENTS**

**CITY OF LINCOLN  
NEBRASKA**

**ANNUAL SERVICES  
Occupational Health Clinic Services  
Bid No. 16-033**

**Company Care  
2000 Q Street, Suite 500  
Lincoln, NE 68503  
(402) 421-0904**

**CITY OF LINCOLN  
CONTRACT TERMS**

THIS CONTRACT, made and entered into by and between **Company Care, 2000 Q Street, Suite 500, Lincoln, NE 68503**, hereinafter called "Contractor", and the City of Lincoln, Nebraska, a municipal corporation, hereinafter called "City".

WHEREAS, the City has caused to be prepared, in accordance with law, Specifications, Plans, and other Contract Documents for the Work herein described, and has approved and adopted said documents and has caused to be published an advertisement for and in connection with said Work, to-wit:

**Occupational Health Clinic Services, Bid No. 16-033**

and,

WHEREAS, the Contractor, in response to such advertisement, has submitted to the City, in the manner and at the time specified, a sealed Proposal/Supplier Response in accordance with the terms of said advertisement; and,

WHEREAS, the City, in the manner prescribed by law has publicly opened, read aloud, examined, and canvassed the Proposals/Supplier Responses submitted in response to such advertisement, and as a result of such canvass has determined and declared the Contractor to be the lowest responsible bidder for the said Work for the sum or sums named in the Contractor's Proposal/Supplier Responses, a copy thereof being attached to and made a part of this Contract;

NOW, THEREFORE, in consideration of the sums to be paid to the Contractor and the mutual covenants herein contained, the Contractor and the City has agreed and hereby agree as follows:

1. The Contractor agrees to (a) furnish all tools, equipment, supplies, superintendence, transportation, and other accessories, services, and facilities; (b) furnish all materials, supplies, and equipment specified to be incorporated into and form a permanent part of the complete work; (c) provide and perform all necessary labor in a substantial and workmanlike manner and in accordance with the provisions of the Contract Documents; and (d) execute and complete all Work included in and covered by the City's award of this Contract to the Contractor, such award being based on the acceptance by the City of the Contractor's Proposal, or part thereof, as follows:

**Agreement to full proposal**

2. The City agrees to pay to the Contractor for the performance of the Work embraced in this Contract, the Contractor agrees to accept as full compensation therefore, the following sums and prices for all Work covered by and included in the Contract award and designated above, payment thereof to be made in the manner provided by the City:

**The City will pay for products/service, according to the Line Item pricing as listed in Contractors Proposal/Supplier Response, a copy thereof being attached to and made a part of this Contract. The City shall order on an as needed basis for the duration of the contract. The estimated cost of products or services for City departments shall not exceed \$165,000.00 during the contract term without approval.**

3. Equal Employment Opportunity. In connection with the carrying out of this project, the contractor shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, ancestry, disability, age or marital status. The Contractor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex, national origin, ancestry, disability, age or marital status. Such action shall include, but not be limited to, the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other compensation; and selection for training, including apprenticeship.

4. E-Verify. In accordance with Neb. Rev. Stat. 4-108 through 4-114, the contractor agrees to register with and use a federal immigration verification system, to determine the work eligibility status of new employees performing services within the state of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324 a, otherwise known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of a newly hired employee pursuant to the Immigration Reform and Control Act of 1986. The Contractor shall not discriminate against any employee or applicant for employment to be employed in the performance of this section pursuant to the requirements of state law and 8 U.S.C.A 1324b. The contractor shall require any subcontractor to comply with the provisions of this section.
5. Termination. This Contract may be terminated by the following:
  - 5.1) Termination for Convenience. Either party may terminate this Contract upon thirty (30) days written notice to the other party for any reason without penalty.
  - 5.2) Termination for Cause. The City may terminate the Contract for cause if the Contractor:
    - 5.2.1) Refuses or fails to supply the proper labor, materials and equipment necessary to provide services and/or commodities.
    - 5.2.2) Disregards Federal, State or local laws, ordinances, regulations, resolutions or orders.
    - 5.2.3) Otherwise commits a substantial breach or default of any provision of the Contract Document. In the event of a substantial breach or default the City will provide the Contractor written notice of said breach or default and allow the Contractor ten (10) days from the date of the written notice to cure such breach or default. If said breach or default is not cured within ten (10) days from the date of notice, then the contract shall terminate.
6. Independent Contractor. It is the express intent of the parties that this contract shall not create an employer-employee relationship. Employees of the Contractor shall not be deemed to be employees of the City and employees of the City shall not be deemed to be employees of the Contractor. The Contractor and the City shall be responsible to their respective employees for all salary and benefits. Neither the Contractor's employees nor the City's employees shall be entitled to any salary, wages, or benefits from the other party, including but not limited to overtime, vacation, retirement benefits, workers' compensation, sick leave or injury leave. Contractor shall also be responsible for maintaining workers' compensation insurance, unemployment insurance for its employees, and for payment of all federal, state, local and any other payroll taxes with respect to its employees' compensation.
7. Period of Performance. This Contract shall be effective May 1, 2016. The term of the Contract shall be a four (4) year term with option for two (2) additional one (1) year terms.
8. The Contract Documents comprise the Contract, and consist of the following:
  1. Contract Terms
  2. Accepted Proposal/Supplier Response
  3. Specifications
  4. Special Provisions for Term Contracts
  5. Information Sheet
  6. Instructions to Proposers

The herein above mentioned Contract Documents form this Contract and are a part of the Contract as if hereto attached. Said documents which are not attached to this document may be viewed at: [lincoln.ne.gov](http://lincoln.ne.gov) - Keyword: Bid - Awarded or Closed bids.

The Contractor and the City hereby agree that all the terms and conditions of this Contract shall be binding upon themselves, and their heirs, administrators, executors, legal and personal representatives, successors, and assigns.

IN WITNESS WHEREOF, the Contractor and the City do hereby execute this contract upon completion of signatures on:

Vendor Signature Page  
City of Lincoln Signature Page

Vendor Signature Page

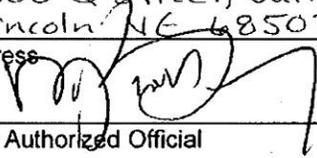
Occupational Health Clinic Services  
Bid No. 16-033  
City of Lincoln  
Lincoln Physician Network, LLC  
d/b/a Company Care

**EXECUTION BY CONTRACTOR**

**IF A CORPORATION:**

Attest:

  
\_\_\_\_\_  
Secretary Seal

Lincoln Physician Network, LLC  
d/b/a Company Care  
\_\_\_\_\_  
Name of Corporation  
2000 Q Street, Suite 500  
Lincoln NE 68503  
\_\_\_\_\_  
Address  
By:   
\_\_\_\_\_  
Duly Authorized Official  
President  
\_\_\_\_\_  
Legal Title of Official

**IF OTHER TYPE OF ORGANIZATION:**

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Type of Organization

\_\_\_\_\_  
Address

By: \_\_\_\_\_  
Member

By: \_\_\_\_\_  
Member

**IF AN INDIVIDUAL:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature

**City of Lincoln Signature Page**

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**Occupational Health Clinic Services  
Bid No. 16-033  
City of Lincoln  
Company Care**

**EXECUTION BY THE CITY OF LINCOLN, NEBRASKA**

ATTEST:

CITY OF LINCOLN, NEBRASKA

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Chris Beutler, Mayor

Approved by Resolution No. \_\_\_\_\_

dated \_\_\_\_\_

# City of Lincoln/Lancaster County (Lincoln Purchasing) Supplier Response

Bid Information		Contact Information		Ship to Information
Bid Creator	Sharon Mulder Asst Purchasing Agent	Address	Purchasing 440 S. 8th St. Lincoln, NE 68508	Address
Email	smulder@lincoln.ne.gov	Contact	Sharon Mulder Asst Purchasing Agent	Contact
Phone	(402) 441-7428			
Fax	(402) 441-6513			
Bid Number	16-033	Department		Department
Title	Occupational Health Clinic Services	Building	Suite 200	Building
Bid Type	RFP	Floor/Room		Floor/Room
Issue Date	01/15/2016	Telephone	(402) 441-7428	Telephone
Close Date	2/12/2016 12:00:00 PM CT	Fax	(402) 441-6513	Fax
Need by Date		Email	smulder@lincoln.ne.gov	Email

## Supplier Information

Company      Company Care  
 Address      2000 Q Street  
                  Suite 500  
                  Lincoln, NE 68503  
 Contact      Joanne Bartels  
 Department  
 Building  
 Floor/Room  
 Telephone    1 (402) 421-0904  
 Fax            1 (402) 742-8419  
 Email  
 Submitted    2/11/2016 3:44:23 PM CT  
 Total           \$0.00

By submitting your response, you certify that you are authorized to represent and bind your company.

Signature Joanne Hermsen Bartels

Email jbartels@stez.org

## Supplier Notes

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## Bid Notes

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## Bid Activities

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## Bid Messages

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Please review the following and respond where necessary

#	Name	Note	Response
1	Instructions to Proposers	I acknowledge reading and understanding the Instructions to Proposers.	Yes
2	Specifications	I acknowledge reading and understanding the specifications.	Yes
3	Information Sheet	I acknowledge reading, completing, and returning the Informational Sheet in my proposal package.	Yes
4	Sample Contract	I acknowledge reading and understanding the sample contract.	Yes
5	Bid Documents	I acknowledge and accept that it is my responsibility as a Bidder to promptly notify the Purchasing Department Staff prior to the close of the bid of any ambiguity, inconsistency or error which I may discover upon examination of the bid documents including, but not limited to the Specifications.	Yes
6	Proposal Submission	I have prepared and delivered/mailed to the City Purchasing Agent nine (9) copies of my proposal as requested in Section 8.1.2 of the Specifications.	Yes
7	Contact	Name of person submitting this bid:	Joanne Bartels
8	Renewal is an Option	Contract Extension Renewal is an option.	Yes
9	Special Provision Term Contract Provisions	I acknowledge reading and understanding the Special Provision Term Contract Provisions.	Yes
10	Term Clause with Escalation/De-Escalation	I acknowledge that the term of the contract will be a (4) four year term from the date of the executed contract with the option to renew for two (2) additional one (1) year terms. (a) Bid prices firm for the first full contract period. YES or NO (b) Bid prices subject to escalation/de-escalation YES or NO (c) If (b), state period for which prices will remain firm: through _____	Firm for the first full contract period
11	Electronic Signature	Please check here for your electronic signature.	Yes

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## Line Items

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#	Qty	UOM	Description	Response
1	1	EA	This is to notify you that RFP 16-033 for Occupational Health Clinic Services for the City of Lincoln is available. Please prepare your written response and return your proposals as instructed in the RFP according to the specifications. Respond to the Attribute section (above) of this electronic bid and submit before the closing date and time. Also, please enter a 0 for your response in this line item. If you have any questions, call 402-441-7416	\$0.00

Item Notes:

Supplier Notes:

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Response Total: \$0.00

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## Company Care

*"Your Work Injury Experts"*

February 12, 2016

Sharon Mulder, Purchasing Agent  
City of Lincoln  
440 South 8<sup>th</sup> Street, Room 200,  
K Street Complex  
Lincoln, NE 68508

Re: Proposal Occupational Health Clinic Services  
RFP Specification No. 16-033

Dear Ms. Mulder:

Company Care and The Physician Network and Saint Elizabeth Regional Medical Center are happy to respond to the City of Lincoln RFP Specification No. 16-033 for Workers' Compensation and Occupational Health Services.

Company Care, the occupational health clinic operated and managed by The Physician Network, is submitting this response to the City of Lincoln with Saint Elizabeth Regional Medical Center and Linc Care.

We are eager to continue providing these services for the City of Lincoln! We highly value the relationship we have developed with the City under our current contract. We believe, as Lincoln's only hospital-based occupational health program, we can continue to provide the City with the only comprehensive occupational health program that is focused entirely on the needs of business and industry in the Lincoln area. Our goal is to bring all of the strengths and assets of The Physician Network and Saint Elizabeth Regional Medical Center to the City, County and its employees. As in the past, we will continue to focus on early detection, disease prevention, employee education and encouraging lifestyle changes to keep City/County employees productive and on-the-job.

As you will see in this proposal and from our current contractual relationship with the City/County, we are committed to providing consistent and comprehensive care for the City of Lincoln's employees.

The names, addresses and phone numbers of the individuals able to facilitate negotiations and answer questions are listed below. Please note, however, that only Kim Moore and Kent Reckewey are authorized to sign any agreements.

5000 N 26th Street, Suite 200, Lincoln, NE 68521  
Phone 402.475.6656 Fax 402.742.8419  
[www.companycareonline.com](http://www.companycareonline.com)

Lisa Haas  
Director of Occupational Medicine  
Company Care  
5000 N. 26<sup>th</sup> Suite 200  
Lincoln, NE 68521  
(402) 475-6656 x335

R. Kent Reckewey, MD  
President  
The Physician Network  
2000 Q Street Ste 500  
Lincoln, NE 68503  
(402) 328-2000

Barbara Brower  
Division Director  
The Physician Network  
2000 Q Street Ste 500  
Lincoln, NE 68503  
(402) 328-4573

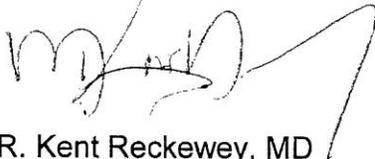
\*  
Joanne Bartels  
Corporate Health Account Executive  
Company Care  
5000 N. 26<sup>th</sup> Suite 200  
Lincoln, NE 68521  
(402) 475-6656 x347

Kim Moore  
President/CEO  
Saint Elizabeth Regional Medical Center  
555 S. 70<sup>th</sup> Street  
Lincoln, NE 68510  
(402) 219-7178

Ilsa Barnard  
Director of Payor Contract Management  
Catholic Health Initiatives  
12809 West Dodge Rd  
Omaha, NE 68154  
(402) 717-7275

The following pages address the RFP's specific requirements in detail. We believe the coordination of services between the various components of The Physician Network and Saint Elizabeth Regional Medical Center offers a unique opportunity to provide improved service to the City, County and Lincoln Electric Systems through multiple locations combined with cost containment because of the discounts available at each location. Thank you for your consideration of our proposal. We look forward to continuing our partnership together.

Respectfully,



R. Kent Reckewey, MD  
President  
Company Care/Linc Care

I. **Information About Respondent – Specific Location(s) of Occupational Health Clinics for This Request for Proposal:**

**Contact Name and Address of Corporate Offices:**

R. Kent Reckeway, MD  
President  
Company Care/Linc Care  
The Physician Network  
2000 Q Street  
Lincoln, NE 68503

Kim Moore  
President/CEO  
Saint Elizabeth Health System  
Saint Elizabeth Regional Medical Center  
555 S. 70<sup>th</sup> St  
Lincoln, NE 68510

**Section 8.8.5: Specific Location(s) for Conducting Treatment or Therapy with Local Addresses, Phone and Fax Numbers:**

**Section 8.8.8: Office Hours for Medical Treatment and/or Rehabilitation Services:**

**Company Care – PRIMARY LOCATION FOR OCCUPATIONAL HEALTH**

Located in the Autumn Ridge Medical Center  
5000 N. 26<sup>th</sup> Street Suite 200  
Lincoln, NE 68521  
Hours: Monday –Friday 7:00 a.m. – 5:00 p.m.  
Phone: 402-475-6656  
Fax: 402-742-8419  
Website: [www.companycareonline.com](http://www.companycareonline.com)

**Saint Elizabeth Sports & Physical Therapy – Autumn Ridge**

5000 N. 26<sup>th</sup> Street Suite 400  
Lincoln, NE 68521  
Hours: Monday–Friday 7:00 a.m. – 6:00 p.m.  
Phone: 402-742-8410

**Saint Elizabeth Sports & Physical Therapy - Southwest**

1230 Aries Drive, Suite D  
Lincoln, NE 68512  
Hours: Monday, Wednesday, Friday 7:00 a.m. – 6:00 p.m.  
Phone: 402-434-5895

**Saint Elizabeth Sports & Physical Therapy – Antelope Creek**

2510 S. 40<sup>th</sup>, Suite 200  
Lincoln, NE 68506  
Hours: Monday, Wednesday, Friday 7:00a.m.-6:00p.m.  
Phone: 402-486-3333

**Saint Elizabeth Sports & Physical Therapy – Stevens Creek**

1601 N. 86th Street, Suite 300

Lincoln, NE 68505

Hours: Monday-Friday 7a.m.-6p.m.

Phone: 402.327.7515

**Linc Care North**

5000 N 26<sup>th</sup> St.

Lincoln, NE 68521

Hours: Mon.-Sat. 9:00 a.m.-9 p.m., Sun. 12:00 noon-9:00 p.m.

Phone: 435-2060

**Linc Care South**

3910 Village Drive

Lincoln, NE 68516

Hours: Mon.-Sat. 9:00 a.m.-9:00 p.m., Sun. 12:00 noon-9:00 p.m.

Phone: 434-7383

**Saint Elizabeth Regional Medical Center**

555 South 70<sup>th</sup>

Lincoln, NE 68510

Hours: 24 hours per day/ 7 days a week

Phone: 219-8000

Website: SaintElizabethOnline.com

**Saint Elizabeth Emergency Department**

555 South 70<sup>th</sup>

Lincoln, NE 68510

Hours: 24 hours per day/ 7 days per week

Phone: 219-7142

**Occupational Health Team of Personnel at Provider Location(s):**

**Section 8.8.3: Service Provider Team of Personnel:**

Company Care's staff consists of an occupational health physician and a physician assistant. Dr. David Durand, the Medical Director of Company Care, is board certified in occupational medicine and specializes in work-related musculoskeletal injuries. He is also a certified Independent Medical Examiner and a Medical Review Officer. He has a strong occupational medicine and business background and holds both a Master in Public Health (MPH) and Master in Business Administration (MBA) degrees. Penni Jackson, PA-C has several years of occupational medicine experience with additional experience in family medicine, veterans administration patient care and emergency room services. He has been with the Company Care team since October of 2013. Tammi Hemje, APRN, joined Company Care in 2015 and has several years of experience working in an onsite employer occupational health clinic before coming to Company Care and Alegent Creighton Occupational Health in Omaha.

Dr. Durand, Penni and Tammi have experience with musculoskeletal injury treatment and back safety education. Their curriculum vitae are included as an attachment to this proposal response.

Other team members include: Certified Occupational Health Nurses, Licensed Practical Nurses, Board Certified Ergonomist, Limited Radiology Technicians, Audiology Technicians, Certified Breath Alcohol Technicians, Certified Saliva Test Technicians, Certified Drug Screen Collection Technicians, Spirometry Technicians, Physical and Occupational Therapists/Exercise Physiologist and a Corporate Health Account Executive.

Additionally, we have two urgent care clinics, Linc Care North and Linc Care South, available for services Monday-Saturday 9a.m.-9p.m. and Sunday 12p.m.-9p.m.. All the Linc Care locations are staffed with at least one physician and other professional health care providers during Linc Care hours. Further, Saint Elizabeth Regional Medical Center's Emergency Department is available 24 hours a day and is staffed with physicians, nurse practitioners, registered nurses, and other professional health care providers.

**III. Policy Regarding Requests for Information or Questions for Clinic Staff:**

**Section 8.8.4: Staff Assistance to Respond to Requests or Questions:**

Company Care is happy to respond to any requests or questions regarding our services. Lisa Haas or Joanne Bartels can serve as your contact for questions regarding this RFP.

Lisa Haas, Operations Manager  
Director of Occupational Medicine  
Company Care  
5000 N. 26<sup>th</sup> Suite 200  
Lincoln, NE 68521  
Mon.-Fri. 7AM-5PM  
(402) 475-6656 x335

Joanne Bartels  
Corporate Health Account Executive  
Company Care  
5000 N. 26<sup>th</sup> Suite 200  
Lincoln, NE 68521  
Mon-Fri 8AM – 5PM  
(402) 475-6656 x347

**IV. Office Hours for the Occupational Health Clinic, and/or Rehabilitation Therapy Services at Each Address Listed:**

**Section 8.8.8: Office Hours for Medical Treatment and/or Rehabilitation Services:**

Company Care's hours of operation are:

Hours: Mon.-Fri. 7a.m.-5p.m.

Both Linc Care locations are:

Hours: Monday-Saturday 9a.m.-9p.m., Sunday 12p.m. (noon)-9 p.m.

Saint Elizabeth Sports & Physical Therapy - 5000 N. 26<sup>th</sup> Street Suite 400

Hours: Monday-Friday 7:00 a.m. – 6:00 p.m.

Saint Elizabeth Sports & Physical Therapy - 1230 Aries Drive, Suite D

Hours: Monday, Wednesday, Friday 7:00 a.m. – 6:00 p.m.

Saint Elizabeth Sports & Physical Therapy - 2510 S. 40<sup>th</sup>, Suite 200

Hours: Monday, Wednesday, Friday 7:00a.m.-6:00p.m.

Saint Elizabeth Sports & Physical Therapy - 1601 N. 86<sup>th</sup> Street, Suite 300

Hours: Monday-Friday 7a.m.-6p.m.

Saint Elizabeth Regional Medical Center's Emergency Department and Inpatient Care is available 24 hours a day/ 7 days a week.

**V. Methods of Records Transmission, Retention and Accessibility:**

**Section 8.7.9: Records Transmission, Retention and Accessibility:**

- After a City of Lincoln, Lancaster County or Lincoln Electric employee is seen by a provider at Company Care for an injury, the employee will receive a "Work Status Summary" report. This report will indicate the diagnosis, treatment, medications, referrals, follow-up appointment dates and times. Our providers will also contact the designated employer representative by phone with the initial visit to answer any questions regarding the initial diagnosis.
- This same report will be faxed or e-mailed to the City's or County's appointed contact as the employee is leaving the clinic.
- The employee's designated physician can receive copies of any occupational health services documentation if desired by the employee.
- If any employee is deemed unfit to perform their assigned duties due to a medical condition in light of the medical exam, their job description and any regulatory requirements for their position, the designated City contact will be notified immediately.
- Strict confidentiality is our highest priority and will be maintained by us at all times.

- We comply with all applicable federal, state, and local statutes, regulations, and ordinances concerning records retention, including the requirements of regulatory agencies such as OSHA.
- Medical records for services provided are maintained in a manner to ensure confidentiality. Access to or disclosure of records is based upon Company Care receiving an appropriate signed consent or disclosure authorization from the employee or as otherwise permitted by applicable law, including the Nebraska Workers' Compensation Act.

**VI. Overall Approach or Philosophy of Company Care:**  
**Section 8.8.1: Overall Approach or Philosophy:**

Company Care is dedicated to serving Nebraska's business and industrial communities by providing comprehensive occupational health services, focusing on the unique needs of each individual through workplace education, safety, injury prevention and treatment, and physical and industrial rehabilitation services.

We are committed to delivering a quality, comprehensive, cost-effective plan to the City/County/Lincoln Electric System for its workers' compensation injury care.

**Program Goals:**

- Respect for employer's "need to know"
- Clear, consistent communication with employer
- 24-hour response
- Strong return-to-work orientation
- Individualized programs
- Employer-specified programs
- Prompt, efficient customer service
- Timely communication with employer, client, and health care professionals
- Outcomes clearly defined and documented

All of our services are based on the unique occupational health needs of business and industry. We can assess your current safety programs, injury rates, absenteeism and health promotions to determine objectives that meet your needs.

**Medical Treatment of Injured Workers:**

The Injury Care Clinic located at Company Care provides walk-in service for such on-the-job injuries as sprains and strains, eye injuries, minor burns, and lacerations needing stitches. Laboratory and x-ray services are located on-site. Personnel providing these services include Company Care occupational health physician, Dr. David Durand, a Physician Assistant, Licensed Practical Nurses and Limited Radiology Technicians (LRT).

**Additional Features that Set Company Care Apart:**

- Quality, cost-effective, injured worker medical care
- Easy access to Physician and/or Physician Assistant for medical treatment and care management to reduce lost work time due to injuries
- Continuity of care from initial injury treatment through rehabilitation, if necessary, to return to work
- Prompt communication regarding injury treatment to both the employee and employer
- Strong return-to-work orientation

- Outcomes clearly defined and documented
- A distinct understanding of work demands
- Tailored programs that address individual company needs

Our goal is to offer a proactive injury treatment program that will benefit the employee while saving the employer both time and money. Company Care and all Linc Care locations provide quality cost efficient care. These urgent care clinics provide an alternative to more expensive emergency room visits. However, Saint Elizabeth Regional Medical Center's Emergency Department is always available for more serious medical emergencies and is accessible 24 hours per day/ 7 days per week.

Company Care appreciates the opportunity to afford prompt, easily accessible medical care and follow-up for your employees who are injured on the job. We strive to address all concerns in the work environment including providing detailed work restrictions and instructions.

When City of Lincoln, Lancaster County or Lincoln Electric System employees are treated at Company Care, the designated contact will receive a fax/email as the employee leaves the clinic. This "Work Status Summary" report will indicate the diagnosis, treatment, medications, referrals, follow-up appointment time and date. The employer will also receive a call from our office if it is an initial injury.

Specific protocols will be set up to insure proper communication to each of the designated employer representatives. The Corporate Health Account Executive is available to assist with any questions or problems that may arise.

All charges will be prepared on the Standard Health Insurance Claim Form (CMS-1500, formerly known as the HCFA-1500), accompanied by appropriate medical documentation and forwarded to the attention of City of Lincoln Department of Risk Management or Lancaster County Risk Management and sent every 3-5 days throughout the month. Any charges incurred through utilization of the Saint Elizabeth Emergency Department will be billed separately according to the hospital's charge schedule.

**VII. Program Implementation Plan/Schedule:**  
**Section 8.8.2: Possible Planning Schedule for Implementation:**

Successful occupational health clinics must be able to respond to the changing demands of business and industry and must be prepared to handle increased demand on short notice. Company Care is available to begin performing any necessary services immediately upon notification of the contract award. We have resources/protocols in place within our system to meet the expected demand for services that award of this contract would produce.

# Company Care

**VIII. Cost of Services: Will a Discount Over and Above the State Workers' Compensation Fee Schedule be Provided?**

**Section 8.8.7: Cost of Services and All Discounts:**

**Summary of Discounts:**

<p><b>Workers Compensation Treatment offered at the following locations:</b></p> <p>Company Care</p> <p>Linc Care</p> <p>St. Elizabeth Sports and Physical Outpatient Therapy</p>	<p>Corvel and The Physician Network currently have an agreement that equates to a 5% discount from the current Nebraska workers compensation fee schedule. Company Care will allow an additional <b>2%</b> discount from the agreed upon Corvel rate creating an aggregate discount of 7%.</p>
<p><b>Inpatient Hospital Services</b></p>	<p><b>20%</b> discount from Hospital's normal billed charges</p>

**IX. Section 8.7.6: Experience of the Respondent/Service Provider:**

Company Care's Medical Director, Dr. David Durand, is board certified in occupational medicine and specializes in work-related musculoskeletal injuries. He is also a certified Independent Medical Examiner and a Medical Review Officer. He has a strong occupational medicine and business background and holds both a Master in Public Health (MPH) and Master in Business Administration (MBA) degrees. Penni Jackson, PA-C has several years of occupational medicine experience with additional experience in family medicine, veterans administration patient care and emergency room services. He has been with the Company Care team since October of 2013. Tammi Hemje, APRN, joined Company Care in 2015 and has several years of experience working in an onsite employer occupational health clinic before coming to Company Care and Alegent Creighton Occupational Health in Omaha. Their curriculum vitae are included in this RFP.

Company Care's team of providers also brings professional expertise in:

- Back safety and overall injury prevention;
- Identifying exposure and injury risks;
- Medical care and treatment to increase the overall health of any employer's workforce;
- Identifying examination needs for individuals performing specific job functions;
- Awareness and understanding of the DOT and NFPA 1582 requirements; and
- Extensive past experience in providing workers' compensation treatment for City, County and Lincoln Electric System employees.

In addition to our team's wide-ranging experience and expertise as noted above,

- Company Care has Certified Breath Alcohol Technicians trained in the use of the Breath Alcohol Intoxilizer, which supports the Federal Department of Transportation regulations regarding breath alcohol testing.

The Occupational Health Staff at Company Care has provided services to business and industry since 1990. We are dedicated to providing the highest quality of care for our clients. Our demonstrated professionalism, expertise, and personalized service distinguish us from others in the occupational health field.

X. **Section 8.8.10: The Following Sample Copies of Our Treatment, Work Restrictions or Therapy Report Forms are Included as Part of This Proposal Response:**

Medical Treatment/Return to Work Form (Work Status Summary)

Physical Therapy Progress and Treatment Form

Sample Functional Screen

Medical Determination of Respirator Use Form

**XI. Section 8.8.14: Insurance Information.**

Company Care is covered by Workers' Compensation coverage, Commercial General Liability, Automobile Liability, and Professional Errors and Omissions Liability insurance. In addition, medical malpractice insurance is maintained on Dr. Durand, Penni Jackson, PA-C and Tammi Hemje, APRN through The Physician Network.

Copies of the required certificates of insurance for the listed insurance coverages, including the current endorsement for Company Care's Medical Professional Liability insurance in which the City of Lincoln is listed as an additional insured, are enclosed with this proposal response.

λil. **Section 8.7.15: Client Reference List/Letters:**

**City of Lincoln – Firefighters**

Chief Tim Linke/Sandy Yost

1801 Q St.

Lincoln, NE 68508

441-7315

Employees – 250+

DOT physicals, annual physicals, fit for duty exams, drug screens, and immunizations and work comp injury care

Service time: 2003-present

**City of Lincoln – StarTran**

Mr. Mike Weston

710 J Street

Lincoln, NE 68508

441-8467

Employees – 50+

DOT physicals, Fit for Duty Physicals, drug screens, and work comp injury care

**Nebraska Air National Guard –Firefighters**

Jeff Horne

2420 W. Butler

Lincoln, NE 68524

309-1524

Employees – 18 (firefighters)

Firefighter physical to include: hazmat physical, EKG, pulmonary function test, audiogram, vision screen, chest x-ray, lab work, and immunizations and workers compensation injury care

Service time: 2001-present

**Duncan Aviation**

Leon Holloway

PO Box 81887

Lincoln, NE 68501

(402) 479-1545

Employees – 1500+

Post-offer, random and DOT drug testing and workers' compensation injury care

Service time: January 2006-present

**XIII. Section 8.8.11: Provisions for Making Job Site Visits to Review Job Requirements:**

Job site visits by qualified staff are available to the City of Lincoln, Lancaster County and Lincoln Electric System as needed and requested. Our staff is willing and able to make job site visits to address the specific needs of the employer. Either an Occupational Therapist or Physical Therapist or Physical Therapist Assistant can perform a job site evaluation as requested.

**XIV. Section 8.8.12: Safety Examinations or Wellness-related Examinations, Training or Therapy:  
and  
Section 8.8.13: DOT Physical Examinations or Fit For Duty or LTD Physical Examinations**

**Safety and Health Training:**

The Physician Network, Saint Elizabeth Sports and Physical Therapy provides a variety of injury prevention and safe work educational programs covering a wide variety of topics. These classes are customized to the specific group and job site concerns. A Physical/Occupational Therapist and/or a Certified Occupational Health Nurse provide instruction.

**Back Safety Education Training:**

Saint Elizabeth Sports and Physical Therapy offer back safety education training programs that can be customized to meet the employer's specific teaching objectives. For example, a back safety program may cover basic anatomy to assist the worker in understanding how the body is designed to function. A discussion concerning stressful work positions and why these positions are so stressful can follow. Ways to avoid stressful work positions and better work techniques are then discussed. In addition, instruction can be given on specific warm-up exercises for the back and/or upper extremities. In providing back safety education training, an emphasis is placed on the employee's personal responsibility and need for lifestyle changes both at work and home. The ultimate goal of back safety education training is to decrease the risk of injury.

**Respirator Certification Exams (including review of the OSHA-required Questionnaire):**

Company Care is able to perform the "respirator questionnaire review" for respirator clearance as required under the OSHA Respirator standard. This service is designed to screen candidates who may or may not require further testing and/or evaluation. Company Care providers will review the OSHA Respirator Evaluation Questionnaires. Once reviewed, Company Care will provide the employer and employee a copy of the "Medical Determination

of Respirator Use” form. In addition, Company Care will keep a copy of this completed form at our Company Care location.

Further evaluation may include any of the following: physical examination, pulmonary function test, and/or chest x-ray.

### **Ergonomic Work Station Assessment:**

Company Care and Saint Elizabeth Sports and Physical Therapy also provide ergonomic job site evaluations. Either a Physical or Occupational Therapist performs this service. These evaluations assist in identifying changes in work techniques as well as possible job or equipment modifications that may assist with developing reasonable accommodations, resolving a medical condition, or preventing injury.

### **Wellness Training:**

In addition to Back Safety and Health Training, other employee wellness programs can be coordinated to meet almost any wellness topic requested. Company Care can assist with programs offered through Saint Elizabeth Regional Medical Center. Costs are negotiable based upon program.

### **Immunizations:**

Immunizations can be provided upon request. Some commonly requested immunizations include

- Influenza Vaccinations
- Hepatitis B immunizations
- Diphtheria-Tetanus-Pertussis (TDAP) immunizations

### **Blood Chemistry Profiles:**

Company Care also can provide Blood Chemistry profile screenings at your locations. A copy of these results will be sent to each employee and a copy can be sent to their personal physician if requested by the employee.

### **DOT Physicals:**

Company Care can provide a complete United States Department of Transportation (DOT) physical exam for the City of Lincoln, Lancaster County and Lincoln Electric employees. This includes all aspects of providing a complete DOT physical exam as described in the DOT form. The DOT form requires a complete physical, a vision test, urinalysis, and a “whisper” hearing test. The “whisper” test is a hearing test performed by recording the distance from the patient at which a forced whispered voice can first be heard.

### **Fitness for Duty:**

These exams can be performed upon request. A Fit for Duty Screening following a work-related injury or personal injury or illness would be performed at our Company Care location at 5000 N.26<sup>th</sup> Street, Suite 200. Components can include a Fit for Duty Physical by our Occupational Medicine Physician and a Fit for Duty Functional Exam, based on the essential function of their job, performed by a Physical/Occupational Therapist. From these components, Dr. Durand can make a determination if the employee is capable of returning to their current position with or without restrictions.

### **Long Term Disability Exams**

Dr. Durand performs Long Term Disability Exams. Charges for these exams are based upon the complexity of the individual case.

7. **8.8.16 Additional Data:**

**After Hours Program** - Company Care has an after hours program that will help guide your personnel in the right direction with a work related injury. We have a number dedicated to questions after hours that will be answered by one of our providers. They will help triage the injury and answer any questions that an employer may have.

**After hours Drug/Breath Alcohol Testing** - Company Care also provides after hours drug and breath alcohol testing. We partner with Heartland Toxicology to come on site at either Linc Care or the Saint Elizabeth Regional Medical Center Emergency Department to provide testing along with the treatment of a work related injury. If there is no injury treatment, Heartland Toxicology can come onsite to the employer to provide any drug screen or breath alcohol test needed.

**Injury Kits** - Company Care also has injury kits available to help employers provide an injury protocol to their employee's in the event of a work related injury. Company Care has protocols specific to your company where an urgent care or emergency department does not. These kits will help provide a consistency of communication not only to the healthcare staff, but your own employee's.

**\*Costs:**

Medical Exam(ie., respirator, hazmat, post offer)	\$55.00
DOT Physical	\$45.00
Respirator Questionnaire Review	\$25.00/questionnaire
1 View Chest X-ray	\$75.00
2 View Chest X-ray	\$100.00
PFT (Pulmonary Function Test)	\$25.00
Audiogram	\$15.00
Audiogram w/Interpretation	\$20.00
Carbon Monoxide blood draw	\$45.00
Lead Level blood draw	\$35.00
ZPP blood draw	\$45.00
Hepatitis B Vaccine	\$162.00 (for the series of 3)
Influenza Vaccine - Trivalent	\$19.00 (based on 2015 prices)
Long Term Disability Rating	Cost is based on complexity of the case
Independent Medical Evaluations/Second Opinions	Cost is based on complexity of the case
Fit for Duty Medical Exam	\$100.00
Fit for Duty Functional Exam	\$45.00
Safety and Health Training	\$110.00/hour
Ergonomic Workstation Assessments	\$110.00/hour
Back Safety/stretching Education Training	\$110.00/hour

**Comments:**

\*Pricing has been discounted to reflect the pricing included in RFP 13-197- Employee Medical Exams

Additional chemical blood work available upon request.