

12 May 2003



Level 1, Old Bank Chamber,
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PO Box 10-254, Wellington, New Zealand
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Dear

**REQUEST FOR PROPOSALS – SUPPLY OF EVALUATION SERVICES FOR THE PILOT
CARDIOVASCULAR RISK AWARENESS CAMPAIGN**

PHARMAC invites proposals for the supply of services for the evaluation of any change in the demographic characteristics and cardiovascular risk profile of patients prescribed statins through general practice following the pilot Cardiovascular Risk Awareness Campaign.

This request for proposals (**RFP**) letter incorporates the following schedules:

- Schedule 1 specifies the services for which PHARMAC is requesting proposals and sets out the background to the RFP;
- Schedule 2 describes the process that PHARMAC expects to follow in relation to the RFP; and
- Schedule 3 specifies the information you need to include with your proposal.

If you wish to submit a proposal, please submit it to PHARMAC no later than 5.00 p.m. on 30 May 2003.

If you have any questions about this RFP, please contact Tracey Barron, Demand Side Manager at PHARMAC.

We look forward to receiving your proposal.

Yours sincerely

Wayne McNee
Chief Executive

Schedule 1: Description of services and background to RFP

1. Description of services

PHARMAC is interested in considering any proposals from experienced general practice researchers for the provision of the following services:

- recruitment of general practices in both the Gisborne and Porirua regions to participate in the evaluation;
- obtaining ethics approval if required;
- review of patient case notes on those prescribed statins, starting both prior to and after the start of the pilot campaigns (on 30 March 2003), noting the relevant demographic characteristics of each individual and their level of cardiovascular risk;
- evaluation of the demographic characteristics (including age, gender, ethnicity) and cardiovascular risk profile of patients prescribed statins within the pilot regions both prior to and after the start of the pilot campaign;
- identification of any differences in both the demographic profile and level of cardiovascular risk in those prescribed statins following the campaign;
- production of a paper on the researchers findings to a publishable standard;
- providing PHARMAC with a progress report from the evaluator after 1 month and a final report on 31 December 2003.

The evaluator would be independent and would be required not to disclose any confidential information pertaining to individual patients or doctors that was obtained from any general practice.

PHARMAC staff anticipate that the contract period for the supply of services described in this RFP would be for a period of six months.

2. **Background to RFP**

PHARMAC launched a pilot Cardiovascular Risk Awareness Campaign of three months duration on the weekend of 30 March 2003. This pilot campaign is in line with PHARMAC's function to "promote the responsible use of pharmaceuticals" (section 48 (d) of the New Zealand Public Health and Disability Act 2000). The pilot campaign was designed to increase awareness, especially in men aged over 45, that they are at risk of heart disease and stroke and that they can make positive steps to decrease their risk.

PHARMAC is working with the Heart Foundation and SPARC on this pilot campaign. The Quit group is also supportive of the pilot campaign.

One of the key aims of the pilot campaign is to increase the number of people being treated with statins who have a cardiovascular risk level of 15% or more. Gisborne and Porirua were chosen

especially because of the high proportions of Pacific people in Porirua and Maori in Gisborne. Historically Maori and Pacific peoples have had a low rate of statin therapy uptake.

The PHARMAC Board requires an evaluation component to evaluate the pilot campaign before it is considered for launch nationally.

Schedule 2: RFP Process

The following is indicative of the process that PHARMAC expects to follow in relation to the RFP. PHARMAC expects to follow the process in the sequence set out below.

1. Submission

- (a) You may submit more than one proposal. Each proposal will be considered as a separate proposal. Respondents are welcome to work with other recipients of the RFP on joint proposals.
- (b) Four copies of the proposal must be submitted no later than 5.00 p.m. (New Zealand time) on 30 May 2003. Late proposals will only be considered at PHARMAC's discretion.
- (c) You cannot withdraw your proposal, once submitted, while the RFP process is continuing.
- (d) All proposals must be submitted to PHARMAC at Level One, Old Bank Chambers, 98 Customhouse Quay, PO Box 10-254, Wellington, to the attention of Tracey Barron, Demand Side Manager, either by hand delivery, by courier or by post (and not by facsimile or email).

2. Evaluation

- (a) Following the deadline for submitting proposals an Evaluation Committee comprising PHARMAC staff and one or more independent external evaluator/s will evaluate each proposal to select its preferred proposal(s).
- (b) The matters to be taken into account by the Evaluation Committee will include:
 - (i) the decision criteria set out in PHARMAC's then current Operating Policies and Procedures (OPPs), as published on PHARMAC's website (www.pharmac.govt.nz), to the extent applicable;
 - (ii) information required to be included with your proposal, as specified in Schedule 3;
 - (iii) any other matters that the Evaluation Committee considers to be relevant,provided that the basis on which the Evaluation Committee will otherwise evaluate proposals and the weight to be given to the criteria and other matters that it considers, are ultimately at the discretion of the Evaluation Committee.
- (c) Each proposal will be evaluated on the basis that the price offered, the expenditure entailed and any other terms included in the proposal are the best that you are able to offer. If you do not put forward your best terms you risk having your proposal excluded at the evaluation stage.
- (d) PHARMAC is not bound to select the lowest priced proposal or any proposal.

3. **Negotiation**

- (a) PHARMAC may negotiate with the submitter(s) of one or more preferred proposals, in the latter case whether or not the acceptance of either service provider's proposal would exclude acceptance of the other proposal.
- (b) PHARMAC may negotiate and enter into a provisional agreement with a preferred respondent(s) on whatever terms PHARMAC considers appropriate.
- (c) Given that PHARMAC expects your proposal to be the best you can offer, PHARMAC does not intend to initiate negotiation with you on price. However, PHARMAC does not exclude the possibility that the final price agreed will be different from the price put forward in your proposal, as a result of the impact that other negotiated terms may have on price.
- (d) If PHARMAC and the service provider(s) are unable to reach a provisional agreement within what PHARMAC considers to be a reasonable time, PHARMAC may terminate those negotiations and negotiate with a different service provider(s).

4. **Approval**

- (a) Any provisional agreement will be conditional on Board approval (or approval by PHARMAC's Chief Executive under delegated authority).
- (b) The provisional agreement will be considered by PHARMAC's Board (or by PHARMAC's Chief Executive under delegated authority) in accordance with the decision criteria in PHARMAC's then current OPPs.
- (c) If the Board or the Chief Executive does not approve the provisional agreement, then PHARMAC may initiate negotiations for a provisional agreement with any other service provider(s).
- (d) The RFP process will be complete once PHARMAC has notified service providers of either:
 - (i) the Board's or its Chief Executive's decision to accept a negotiated agreement; or
 - (ii) the termination of the RFP process.

5. **Miscellaneous**

- (a) PHARMAC reserves the right:
 - (i) to make such adjustments to the above RFP process as it considers appropriate, at any time during the process, provided that it notifies service providers affected by those changes;
 - (ii) to meet with you at your place of business to discuss your proposal and to gain an understanding of your work environment;
 - (iii) not to accept any proposal;

- (iv) not to provide reasons for the acceptance or non-acceptance of any proposal;
 - (v) to enter into an agreement or arrangement that differs in a material respect from that envisaged in this RFP letter;
 - (vi) to terminate this RFP process at any time, by notifying service providers who submitted proposals, and, following termination, to negotiate with any service provider(s) on whatever terms PHARMAC thinks fit;
 - (vii) to readvertise for proposals.
- (b) You must not initiate or engage in any communication with other service providers in relation to the RFP whether before or after submitting proposal(s), until such time as a provisional agreement is accepted by PHARMAC's Board or Chief Executive.
 - (c) You must not at any time initiate any communication with PHARMAC's directors or officers, the Ministry of Health, the Minister of Health or District Health Boards, with a view to influencing the outcome of this RFP process.
 - (d) PHARMAC is not liable for any direct or indirect costs incurred in submitting a proposal.
 - (e) Proposals are submitted in reliance on your own knowledge, skill, and independent advice, and not in reliance on any representations made by PHARMAC.
 - (f) This is an RFP and not a tender. Your proposal is not an offer capable of being converted into a contract by PHARMAC's apparent acceptance and instead a separate agreement needs to be negotiated. Further, PHARMAC is no way contractually bound to follow the process outlined in this RFP, which is simply indicative.

6. Anticipated timetable

- (a) Following receipt of proposals, PHARMAC anticipates:
 - (i) the Evaluation Committee evaluating proposals in June 2003;
 - (ii) negotiating with submitter(s) of one or more preferred proposals in June 2003;
 - (iii) PHARMAC's Board or Chief Executive considering the provisional agreement in or after June 2003;
- (b) Under this indicative timetable, the earliest that the proposal could be implemented is August 2003.

Schedule 3: Information to be included in the proposal

- (a) name of service provider;
- (b) contact person;
- (c) contact details (address, telephone, fax etc.);
- (d) details of services proposed and key features of the proposal;
- (e) detailed pricing (GST exclusive), for undertaking the various services specified in clause 1 of Schedule 1, itemised to each specific service where applicable and including any related conditions or proposed terms affecting cost for PHARMAC;
- (f) reliability/resourcing/ability to ensure timely delivery of services;
- (g) relevant expertise, experience and evidence required:
 - Expertise in:
 - pharmaceuticals, pharmaceutical data analysis, and general practice research;
 - the subject area and international and national trends;
 - Experience in:
 - the subject area;
 - developing evaluation processes to determine programme effectiveness, including appropriate evaluation criteria, processes and methodologies for the services described in clause 1 of Schedule 1;
 - **Evidence of:**
 - how you envisage working with PHARMAC in the development and provision of the services;
 - how you would manage recruitment for the services described in clause 1 of Schedule 1;
 - supporting infrastructure to help facilitate the delivery of the services in a short time frame;
- (h) the service provider's own rationale for why it considers PHARMAC should accept its proposal;
- (i) any particular information that the service provider considers PHARMAC should take into account when evaluating the proposal; and
- (j) a declaration of any conflicts of interest known to the service provider.