

Request for Bid
for
Intermittent Pharmacist
SOPSCHK26002

INTRODUCTION

The Iowa Department of Health and Human Services (Agency) is seeking a qualified individual or entity (Service Provider) to provide a pharmacist to provide intermittent coverage during periods of absence, planned or emergent, of permanent employees at the Cherokee Mental Health Institute (CMHI). The Agency anticipates that the term of any resulting contract will be one (1) year, with six (6) – one (1) year renewal options, beginning 10/27/2025.

Bidders interested in providing these services should submit proposals to the Cherokee Mental Health Institute by email to CHEMHIPurchasing@hhs.iowa.gov no later than 2:00 PM Central Time on 9/24/2025. Any proposal received after this deadline will be rejected. Proposals and any other communications shall not be delivered in person.

Proposals should include the Bidder's cost proposal and sufficient information regarding the Bidder's ability to perform the services sought to enable the Agency to make a judgement about the Bidder's ability to perform the work identified in the Scope of Services.

TIMETABLE

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The dates set forth below are for informational purposes only. The Agency reserves the right to change these dates:

9/8/2025	Submit Request for Bid to Targeted Small Business web page.
9/10/2025	Submit Request for Bid to potential bidders.
9/17/2025	Questions regarding Request for Bid and procurement process due.
9/19/2025	Answers to questions provided to potential Bidders.
9/24/2025	Proposals are due.
9/26/2025	Send Notice of Intent to Award naming apparent successful Bidder.
10/27/2025	Target date to execute contract.



RESTRICTION ON COMMUNICATION

From the date of issuance of this Request for Bid until the announcement of the successful bidder, Bidders may not contact any employee of the State of Iowa other than the identified contact person about this solicitation. Bidders may only contact Katelyn Meyers, Procurement Specialist II, by email at Katelyn.meyers@hhs.iowa.gov with questions related to the interpretation of this Request for Bid and the procurement process. Written responses to all questions received will be provided to all potential Bidders. If a Bidder or someone acting on a Bidder's behalf attempts to discuss this Request for Bid orally or in writing with any members of the evaluation committee, or any employee of the State of Iowa, other than Katelyn Meyers the Bidder may be disqualified.

QUESTIONS AND ANSWERS

Any questions related to this Request for Bid must be emailed to CHEMHIPurchasing@hhs.iowa.gov no later than 2:00 PM central time on 9/17/2025. Questions will only be accepted in writing by email. Answers to all proposed questions will be posted publicly on 9/19/2025 as an attachment to this solicitation on the State of Iowa Bid Opportunities website.

SCOPE OF SERVICES

The successful Bidder will provide a licensed pharmacist to provide in-person on-site coverage in the absence of Cherokee Mental Health Institute (CMHI) staff Pharmacist(s) during normal business hours. The Cherokee Mental Health Institute is located at 1251 West Cedar Loop, Cherokee, Iowa 51012. The CMHI Pharmacy is open from 8:00 AM to 4:30 PM Monday through Friday, excluding State Holidays as identified at https://das.iowa.gov/state-employees/state-accounting/centralized-payroll/state-holidays. The need for coverage will be intermittent, on an as-needed basis, without guarantee for a minimum number of hours.

The successful Bidder must be licensed or able to obtain immediate licensure in the State of lowa and maintain licensure through the duration of any awarded contract.

While providing coverage, the successful Bidder will:

- Perform services customarily performed by a hospital pharmacist in the typical course of business including order verification, checking bulk medications, and use of automated dispensing machines;
- 2. Be familiar with the pharmaceutical dispensing software Netsmart's Rx Connect program or ability to learn the pharmacy software;
- 3. Work cooperatively with Agency Pharmacy Technicians, nursing and medical staff;
- 4. Be able to provide drug information to Agency nursing and medical staff.



EVALUATION CRITERIA

The Agency intends to award this Request for Bid to the Bidder that meets all minimum criteria as outlined in this solicitation at the lowest proposed cost. Please include the following elements, if applicable, in your proposal:

- 1. Rate(s) of service;
- 2. The capacity of the Bidder to complete the responsibilities described in the Scope of Services:
- 3. Experience and references that demonstrate, to the satisfaction of the Agency, the expertise and ability of the Bidder to provide the Scope of Services described.

TERMS AND CONDITIONS

The State of Iowa Standard Terms and Conditions are found at https://das.iowa.gov/vendor-resources/procurement-terms-and-conditions.

NOTICE OF INTENT TO AWARD

Notice of Intent to Award will be sent by email to all Bidders submitting a timely bid proposal no later than 9/26/2025. The Notice of Intent to Award is subject to execution of a written contract and, as a result, does not constitute the formation of a contract between the Agency and apparent successful Bidder.

ACCEPTANCE PERIOD

Negotiation and execution of the contract shall be completed no later than 10/27/2025. If the apparent successful bidder fails to negotiate and execute a contract, in its sole discretion, the Agency may revoke the award and award the contract to the next highest ranked bidder or withdraw the Informal Competitive Solicitation. The Agency further reserves the right to cancel the award at any time prior to the execution of a written contract.



REVIEW OF NOTICE OF DISQUALIFICATION OR NOTICE OF INTENT TO AWARD DECISION

Bidders may request reconsideration of either a notice of disqualification or notice of intent to award decision by submitting a written request to the Agency:

Bureau Chief c/o Bureau of Service Contract Support Department of Health and Human Services Lucas State Office Building 321 E 12th Street Des Moines, Iowa 50319-0075

email: reconsiderationrequest@dhs.state.ia.us

The Agency must receive the written request for reconsideration within five calendar days of the date of either a disqualification notice or a notice of intent to award, exclusive of Saturdays, Sundays, and legal state holidays. The written request may be emailed or delivered by postal service or other shipping service. Do not deliver any requests for reconsideration to the office in person. It is the Bidder's responsibility to ensure that the request for reconsideration is received prior to the deadline. Postmarking or submission to a shipping service by the due date shall not substitute for actual receipt of a request for reconsideration by the Agency.

The request for reconsideration shall clearly and fully identify all issues being contested by reference to the page and section number of the RFP. If a Bidder submitted multiple Proposals and requests that the Agency reconsider a notice of disqualification or notice of intent to award decision for more than one Proposal, a separate written request shall be submitted for each. At the Agency's discretion, requests for reconsideration from the same Bidder may be reviewed separately or combined into one response. The Agency will expeditiously address the request for reconsideration and issue a decision. The Bidder may choose to file an appeal with the Agency within five calendar days of the date of the decision on reconsideration, exclusive of Saturdays, Sundays, and legal state holidays, and in accordance with 441 lowa Admin. Code Ch. 7.