

# Forrest General Hospital

## Bid # 1584

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Special Requirements for Bids

**Forrest General Hospital**  
**Attention: Purchasing Department**  
125 South 28<sup>th</sup> Avenue, Suite 100  
Hattiesburg, MS 39401  
(601) 288-1922

**\*\*\*\*DUE TO THE COVID-19 PANDEMIC, BIDS MUST BE SUBMITTED VIA MAIL ONLY NO LATER  
THAN AUGUST 9, 2022, AT 2:00PM\*\*\*\***

**Mailed-in Bid Envelope Must Be Marked on Outside:**

**BID # 1584 ENCLOSED**  
**"Bakery Items"**

**Bid Opening Date: Tuesday, August 9, 2022**

**Bid Opening Time: Immediately after 2:00 p.m.**

**Bid Opening To Take Place:**  
**Forrest General Hospital**  
**Purchasing Department**  
125 South 28<sup>th</sup> Avenue, Suite 100  
Hattiesburg, MS 39401

**\*\*\*\* DUE TO THE COVID-19 PANDEMIC, THE BID OPENING WILL CONSIST OF TWO (2)  
REPRESENTATIVES FROM THE PURCHASING DEPARTMENT. THE WINNER WILL BE NOTIFIED  
VIA E-MAIL \*\*\*\***

**Forrest Health reserves the right to accept or reject any or all bids, as well as waive any and  
all informalities it deems appropriate.**

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From: Paul DeFreese  
Forrest Health  
Purchasing Department  
125 South 28<sup>th</sup> Avenue  
Hattiesburg, MS 39401

### **SUBJECT: BID INSTRUCTIONS**

You are invited to bid on the attached request for quotation. Please read the information carefully.

The terms and conditions stated in this Request for Quotation shall be considered agreed to, unless specified otherwise. The Board reserves the right to reject any and all bids and to waive irregularities and informalities in the bid.

Please place your Company Name, Address, Telephone number, and Email on the top left of page one (1). Provide the unit price and other information as specified on page six (6) and provide signature of an official of your company at the bottom of page eight (8), the top of page nine (9) and page ten (10).

Return your bid as specified on the attached "Special Requirements" page to the above address for the Forrest Health Purchasing Department in a sealed envelope. **Quotation envelope must be marked with "BID #1584 ENCLOSED" and "Bakery Items" on the outside of the sealed envelope.**

**Quotations received after the specified date, time and/or without bid # on the outside of the envelope, shall not be considered.** Faxed copies of bid will only be accepted if faxed to an outside source and mailed to Forrest Health Purchasing Department in a sealed envelope with all required information on outside of envelope.

Thank you,

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Paul DeFreese  
Purchasing Analyst

# Forrest General Hospital

## Bid # 1584

REQUEST FOR QUOTATION/PROPOSAL  
Forrest General Hospital  
P.O. Box 16389, Hattiesburg, MS 39404  
(FOR SPECIFIED LOCATIONS)

Forrest General Hospital reserves the right to reject any/or all bids and waive any informalities.
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### **“Bakery Items”**

For all practical purposes in other sections of the bid specifications, the proposing bidder may be referred to as the “Vendor” and Forrest General Hospital may be referred to as the “Facility.”

### **Bid Overview**

The Awarded Vendor(s) must provide specified quantities of the items as described in the following options and this request for Quotation/Proposal Specifications for Forrest General Hospital and outlying facilities.

### **Forrest General Hospital Responsibility**

1. The facility shall provide one or more representative(s) who will communicate with the Vendor’s Representative to answer questions, verify bid specifications, coordinate delivery, distribution, and verify invoice information. The facility contact regarding specifications on the bakery items contained in this bid will be Jennifer Easley, Director of Food & Nutrition, phone 601-288-1751, and e-mail [jeasley@forrestgeneral.com](mailto:jeasley@forrestgeneral.com).
2. The awarded vendor will be notified after the bid opening by telephone and letter. Please include your name, mailing address and telephone with your bid. A single contract shall be left for all items described below.
3. The facility reserves the right to reject any/or all bids submitted and waive any informalities, whichever is in the best interest of the facility.

# Forrest General Hospital

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### Vendor Responsibility

1. Vendor shall provide a representative to communicate with the Facilities representative to answer questions, verify bid specifications, receive purchase orders, coordinate delivery and verify receipts and invoices.
2. Vendor shall provide a quality product as requested by the Facility. Items which do not meet expectations for quality and satisfaction will have to be fixed or repaired by vendor within adequate amount of time determined by Vendor and Facility. FOB destination.
3. Alternate proposals with regard to "Group Purchasing Contracts" (example: Vizient, Direct Medical/MHA, Sourcewell, State of Mississippi) must include detailed contract information (i.e., contract date, contract number).
4. Vendor is required to register the company and sales team with Forrest Health's authorized Vendor Credentialing Program, Green Security.
5. **The Vendor Representative will be responsible for completing and signing all documents included in the bid packet. Vendors who do not submit all required documents at the time of bid opening will not be considered.**
6. Forrest General Hospital will not be responsible for completing credit applications submitted by the awarded vendor. Financial documents are included in the attached documentation.

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### BID CHECKLIST

- ☐ Complete section at top of Page 1 with Company Name, Contact Name, Company Address, Phone Number, and Email Address.
- ☐ On Page 8, check Yes or No to certify that you and your company qualify to do business as a resident of the State of Mississippi.
- ☐ On Page 8, if you are a non-resident person/firm/corporation, check Yes or No to confirm that a copy of your Resident State's Law pertaining to your state's treatment of non-resident bidders is attached.
- ☐ On Page 8, fill in the information requested in the center of the page to include Date, Vendor, Address, Official Signature, and Print Name & Title
- ☐ On Page 9, Standard Contract Addendum – please enter Vendor's name in space provided at top of the page
- ☐ On Page 10, Standard Contract Addendum – please sign Contractor's name, and date at the bottom left of the page.

### Items Required with Bid:

- ☐ **Provide certificate of insurance:**  
Vendor must provide a copy of certificate of insurance with bid:
  - The amount of Worker's Compensation coverage required by Mississippi State Law.
  - Commercial General Public Liability with a minimum coverage of \$1,000,000.00 per occurrence and \$3,000,000.00 in the annual aggregate.
  - Automobile General Liability with a minimum coverage of \$1,000,000.00.
- ☐ **Standard Contract Addendum** (pages 9 & 10)

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### Bid Product Specifications and Information

Forrest County General Hospital requests pricing for the following items as per bid specifications. List Unit Price and Extended Price in the chart below.

#### “Bakery Items”

Item #	Estimated 12-Month Usage	Description	Unit Price	Extended Price
1	3,708	Whole Wheat Bread, 1-lb Loaves, Regular Slice		
2	3,984	Hamburger Buns, Made from Enriched White Flour, 12 Buns/Pack, 20-oz Pack		
3	672	Hot Dog Buns, Made from Enriched White Flour, 16 Buns/Pack		
4	2,988	Enriched White Bread, Thin-Sliced Sandwich Type, 2oz Each		
5	720	Texas Toast Loaves, 1lb-4oz, 14-15 Slices per Loaf		

Total Extended Annual Spend \$\_\_\_\_\_

# **Forrest General Hospital**

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### **Delivery Locations**

Vendor(s) will be responsible for making deliveries to the following locations. Additional facilities may be added as needed and pricing is to remain firm for the duration of the bid.

Forrest General Hospital  
6051 US Hwy 49  
Hattiesburg, MS 39401

Pine Grove  
2255 Broadway Drive  
Hattiesburg, MS 39401

Orthopedic Institute  
27 Southern Pointe Parkway  
Hattiesburg, MS 39401

Asbury Hospice House  
304 South 40<sup>th</sup> Avenue  
Hattiesburg, MS 39402

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Bidders who are non-residents of the State of Mississippi must comply with the provisions of Section 31-3-21(3) of the Mississippi Code of 1972, as amended.

I certify that my company and I qualify to do business as a resident of the State of Mississippi.

Yes \_\_\_\_\_ No \_\_\_\_\_

As a non-resident person, firm or corporation, I confirm that a copy of my Resident State's Law pertaining to my state's treatment of non-resident bidders is attached.

Confirmed: Yes \_\_\_\_\_ No \_\_\_\_\_

We quote/propose you as specified by Forrest General Hospital in this Bid.

Date \_\_\_\_\_

Vendor \_\_\_\_\_

Address \_\_\_\_\_

Official Signature \_\_\_\_\_

Print Name & Title \_\_\_\_\_



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### FORREST COUNTY GENERAL HOSPITAL STANDARD CONTRACT ADDENDUM

This standard contract addendum ("Addendum") is an integral part of contracts entered into by Forrest County General Hospital ("FCGH") and shall become a part of the following listed Agreements with

\_\_\_\_\_ ("Contractor") as if fully copied into the body of that Agreement. FCGH owns, controls, or does business as the following entities: Jefferson Davis Community Hospital, Marion General Hospital, Walthall General Hospital, and Highland Community Hospital.

The following terms shall control over any and all conflicting parts of the Agreement:

1. FCGH is a political subdivision of the State of Mississippi and is afforded the protection of limited sovereign immunity pursuant to the Mississippi Tort Claims Act (Mississippi Code Annotated, Section §11-46-1, et seq. as amended) and the Mississippi Constitution, including Article 4, Section 100. Any action against FCGH shall be subject to the limitations contained in those and other applicable laws, including interpretations by the Mississippi Attorney General's Office of the laws applicable to FCGH and/or the Agreement, none of which are waived by FCGH by entering into the Agreement.
2. FCGH contracts (including the Agreement) are governed by and interpreted under the laws of the State of Mississippi and the jurisdiction/venue for any litigation, special proceeding or other proceeding as between the parties that may be brought, or arise out of, in connection with, or by reason of the Agreement shall be in Forrest County, Mississippi.
3. No contract (including the Agreement) may be for a term of more than three (3) years unless it is an agreement regarding physical property (i.e., lease agreement for buildings, property, etc.).
4. Generally, Mississippi law does not allow FCGH to agree to contractual provisions under which it indemnifies or holds harmless another person or entity. Only to the extent permissible by Mississippi law does FCGH agree to any vendor's references, if any, to limitation of liabilities, damages, and indemnifications.
5. Any references to attorney's fees to be paid by FCGH are deleted. Any reference to FCGH indemnifying or holding harmless the Contractor is deleted; FCGH does not agree to defend any contractor. Each party shall be responsible for its own defense against all claims, liabilities, losses and expenses, including reasonable costs, collection expenses and attorneys' fees, which may arise because of the negligence, misconduct or other fault of its own agents or employees in the performance of its obligations under this Agreement. Mississippi law also does not allow FCGH to agree to mandatory arbitration, choice of law (other than Mississippi), or choice of venue (other than Forrest County, Mississippi), and provisions in the Agreement to the contrary are hereby deleted.
6. All references to interest, penalties, and/or late fees to be paid by FCGH on other than lease-purchase contracts not exceeding five years are deleted. FCGH will pay within forty-five (45) days of invoice, receipt, inspection and approval of goods and services as provided in §31-7-305(3) of the Code.
7. In the event Contractor does not furnish products or services as agreed upon in the Agreement, including any stated time period to cure, FCGH may, at its discretion, declare the Agreement null and void by written notice to the Contractor or may require the Contractor, at Contractor's expense, to make such modification as necessary to make the products or services satisfactory.
8. As a political subdivision of the State, FCGH maintains professional and general liability coverage (or equivalent self-insurance) in the amounts set forth by the Mississippi Tort Claims Act under MS Code Annotated, Section 11-46-1, et seq.) and does not name others as additional insureds.
9. In the event of any conflict between the terms of the Agreement and the terms of this Standard Addendum, the terms of this Addendum shall control. This Addendum and the Agreement constitute the entire agreement of the Parties with regard to the subject matter of the Agreement. In all other respects, the Agreement shall remain unchanged. No modification to the Agreement or any term thereof may be amended except pursuant to in writing signed by an authorized representative of FCGH. Contractor hereby acknowledges that no other person has authority to bind FCGH to any change in any term of the Agreement, and specifically agrees that any Contractor cannot vary the terms of the Agreement by invoice, purchase

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order, memo or otherwise, unless it secures the signature of an authorized FCGH representative, acknowledging and expressly agreeing to the change. No acceptance or payment of an invoice by FCGH where the terms of that invoice that vary the Agreement shall constitute an amendment to the Agreement, but to the contrary shall be treated as mutual mistake and Contractor shall refund any payment received from FCGH which is not in compliance with the price terms and other provisions of the Agreement.

10. Contractor agrees to abide by the requirements of the Mississippi Employment Protection Act (E-Verify Program), as amended, by registering to do business with the Mississippi Department of Employment Security. Contractor further agrees that it shall only employ persons who are legal citizens of the United States or are legal aliens, properly documented and verified by Contractor in compliance with all applicable statutes, regulations and other laws.
11. If providing on site services, Contractor agrees to comply with fingerprinting and criminal history record checks requirements in accordance with Sections 37-29-232 and 43-11-13, Mississippi Code of 1972, as amended, to the extent applicable to Contractor. Contractor shall be responsible for ascertaining the application of those laws to it and its employees providing services under the Agreement.\
12. If providing on-site patient care or on-site services in close proximity to patients, Contractor agrees to ensure its on-site staff have been drug screened no more than thirty (30) days prior to beginning the on-site assignment, using a drug screen procedure that is comparable to the drug screen currently used by FCGH in its post-offer pre-employment drug screening process.
13. Mississippi law limits those who can bind FCGH to any contractual provision and Contractor understands and agrees to this. Any changes in the Agreement, as to price or other terms, shall not be effective unless approved in writing signed by an authorized representative of FCGH.
14. Until the expiration of four (4) years after the furnishing of any Services hereunder, Contractor shall make available upon written request to the Department of Health and Human Services, or upon request to the Comptroller General of the United States, or of their duly authorized representatives this Agreement and the books, documents and records that are necessary to certify the nature and extent of the costs of the Agreement.

**COMPLIANCE:** As part of FCGH's overall Compliance Program, Contractor shall establish procedures and insure adherence to all applicable state and federal statutes, including but not limited to, the Stark Law (§42 USC 1395), the federal False Claims Act, the Medicare Anti-kickback Statutes, the federal Civil Monetary Penalty Act, the provisions of the Medicare carrier manual, Medicare and Medicaid statutes and regulations, the Emergency Medical Treatment and Active Labor Act (EMTALA), the Balanced Budget Act, and the Patient Protection and Affordable Care Act of 2010. All performance by Contractor pursuant to the Agreement shall be done in compliance with the applicable rules and regulations of the Det Norske Veritas (FCGH's accreditation entity) and any third party payer.

Contractor certifies that it has not been disqualified in any manner from any federally funded program, is in compliance with all state, federal and local laws applicable to it and to its performance of the Agreement, and Contractor has never been debarred or limited in any manner from participation in the matters relevant to the Agreement.

### CONTRACTOR

### FORREST COUNTY GENERAL HOSPITAL

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date