

State of Arkansas
Arkansas Department of Health
4815 West Markham, Slot H58
Little Rock, Arkansas 72205
501-280-4573

ADDENDUM #1 - Page 1 of 5

TO: Vendor Listing
FROM: Arkansas Department of Health
DATE: September 19, 2016

SUBJECT: **DH-16-0002 Quality Care Consultant for Critical Access Hospitals**

The following change(s) to the above-referenced Request for Proposal for Arkansas Department of Health has been made as designated below:

- Change of specification(s)
- Additional specification(s)
- Change of bid opening time and date
- Cancellation of bid
- Other

See attached second page for the beginning of vendor questions submitted, and agency responses.

The bid opening time and date will remain the same.

The specifications by virtue of this addendum become a permanent addition to the above-referenced Invitation for Bid. **FAILURE TO RETURN THIS SIGNED ADDENDUM WILL RESULT IN REJECTION OF YOUR BID.**

BIDS WILL BE ACCEPTED UNTIL THE TIME AND DATE SPECIFIED. THE BID ENVELOPE MUST BE SEALED AND SHOULD BE PROPERLY MARKED WITH THE BID NUMBER, DATE AND HOUR OF BID OPENING AND BIDDER'S RETURN ADDRESS. IT IS NOT NECESSARY TO RETURN "NO BIDS" TO THE ARKANSAS DEPARTMENT OF HEALTH.

If you have questions, please contact the Issuing Officer at 501-280-4573.

VENDOR SIGNATURE

DATE

COMPANY

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DH-16-0002 - Questions and Answers

Question #1:

Budget Template-Final Page – Says mileage is \$0.42/mile but federal rate is \$0.54m as is another state ADH contract. Is this correct? If so, why lower??

Answer #1:

In keeping with state policy, reimbursement for this contract will be at the current state rate.

Question #2:

Budget Template-Final Page – Vendor will be required to identify within their budget labor expenses and any indirect costs.” How should this information be displayed in the business proposal? Should we use a fully loaded labor rate inclusive of indirect and fringe, or report these breakouts separately in each section’s labor costs?

Answer #2:

For clarity purposes, the preferred methodology would be to report these breakouts separately.

Question #3:

Budget Template-n/a – The RFP documents include a PDF entitled, “DH-16-0002 Budget Template”. This form is not mentioned in the RFP bBid Solicitation Document. Is this budget template required to be submitted along with the “Official Proposal Price Sheet”?

Answer #3:

Yes, the intent is to provide a guide for developing the vendor’s response and enable the evaluation committee to make a like comparison.

Question #4:

Sections 1.12 and 1.14 – They seem to conflict. 1.12 says use of subs is not allowed yet 1.14 says a joint proposal is acceptable but a single vendor must be identified as the prime contractor. In addition, the proposal packet contains a proposed subcontractor form. Please clarify, may a vendor use a subcontractor ?

Answer #4:

Thank you for the question. To clarify - Use of a subcontractor will not be acceptable. Use of a joint proposal will not be acceptable. The referenced form must be completed, as there is a place for indication/confirmation that a sub-contractor is not being used.

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Question #5:

1.7 and 1.8 – Response documents and organization of response documents – Both of these sections require the submission of the Technical Proposal packet; however, for response to the “information for Evaluation” section in the technical proposal packet, is it acceptable to use a separate Word or Adobe pdf file in a similar format, with same headers, to respond? Or would that be viewed as out of compliance? If you require responses in the packet file the State provided, would you please consider posting a Word version of the packet?

Answer #5:

Attachments are acceptable, but the packet itself should not be altered. The ADH issuing officer, upon request from any vendor, will make this document available through a new email request.

Question #6:

Section 2.1 Introduction – “Designate, in writing, a Project Manager”. Does the Project Manager have to be located in a specific geographic area? Does the State expect this position to be Full Time?

Answer #6:

Expectation is that there will be a written, designated Project Manager. Location is to be accessible to program participants. The amount of time devoted to this position will be adequate to successfully provide deliverables.

Question #7:

Section 2.2 Deliverables – Deliverable #1: Are there specific locations where the meetings and workshops are to be held? If so, please provide names and locations.

Answer #7:

Locations for meetings and workshops will be centralized to meet the needs of program participants.

Question #8:

Section 2.2 Deliverables – Deliverable #1: “Maintain and keep current data reporting tools for abstraction, submission and reporting of quality data.” What is the current data reporting tool(s)? What platform are current tools built in? and will current tools be provided to the contractor to use?

Answer #8:

Reporting tools will be built and maintained by the contractor/vendor.

Question #9:

Section 2.2 Acceptable Performance for Deliverable #1 – «Hospitals determined to be in the lower fifty percent for quality measures by ORHPC will receive a minimum of 2 onsite visits per contract year. » How many CAHs are currently in the lower fifty percent for quality measures ?

Answer #9:

Approximately 14 CAHs are currently identified as being in the lower fifty percent for quality measures.

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Question #10:

Section 2.2 Acceptable Performance for Deliverable #1 – « Regional collaborative education meetings will be conducted prior to January 1. : How many meetings are expected to be completed by January 1, 2017, with the new contract start not expected until mid-October ?

Answer #10:

A minimum of one “set” of regional education meetings is expected to be completed by January 1, 2017. Locations for the meetings will be centralized to meet the needs of program participants.

Question #11:

Section 2.2 Deliverable #2 – “Vendor will collect Emergency department Transfer Communications (EDTC) measures data via electronic means from CAHs quarterly.” What is the electronic means currently used to collect this data? And, will this means be provided for new vendor’s continued use?

Answer #11:

Reporting tools will be built and maintained by the contractor/vendor.

Question #12 :

Who is the current vendor for this work?

Answer #12:

There is not a current vendor for this work. Arkansas Foundation for Medical Care (AFMC) was the previous vendor.

Question #13:

What is the current budget for this contract?

Answer #13:

There are 200 points available for competitive pricing/budget. The vendor is expected to provide the budget needed to complete the scope of work and deliverables.

Question #14:

Could you provide the anticipated budget or budget range for this contract?

Answer #14:

No, there are 200 points available for competitive pricing/budget.

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Question #15:

Information for Evaluation – RE: “Vendor may expand the space under each item/question to provide a complete response.” Does the State require that vendors use the provided “information for Evaluation” sheet showing a column for “Maximum RAW Score Available” and then expand descriptions under each item, OR may the vendor format its own response in the order of the questions given with corresponding question headings?

Answer #15:

The State will accept an attachment that clearly identifies and addresses each of these requirements.

Question #16:

Section 1.7.A.4 – RE: DO NOT include any other documents or ancillary information, such as a cover letter or promotional/marketing information.” May vendors include a Table of Contents to the information for Evaluation? May vendors include a List of Abbreviations used in the information for Evaluation response?:

Answer #16:

Yes, a table of contents and an abbreviation table will be acceptable.

THIS CONCLUDES THE QUESTION AND ANSWER PERIOD FOR RFP DH-16-0002.