

AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT			1. Contract Number		Page of Pages			
					1 6			
2. Amendment/Modification Number		3. Effective Date		4. Requisition/Purchase Request No.		5. Solicitation Caption		
DCHC-2009-R-0002-A005		August 13, 2009				Manage & Operate a Substance Abuse & Detoxification Center		
6. Issued by:			Code		LRT		7. Administered by (If other than line 6)	
Office of Contracting and Procurement General Services Unit 441 4 th Street, NW, Suite 700S Washington, DC 20001							Office of Contracting and Procurement General Services Unit 441 4 th Street, NW, Suite 700S Washington, DC 20001	
8. Name and Address of Contractor (No. street, city, county, state and zip code)				9A. Amendment of Solicitation No.				
				DCHC-2009-R-0002				
				9B. Dated (See Item 11)				
				June 24, 2009				
				10A. Modification of Contract/Order No.				
				10B. Dated (See Item 13)				
Code		DUNS:		TIN		FEIN:		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS								
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended <input checked="" type="checkbox"/> is not extended. Offeror's must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning <u>2</u> copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) BY separate letter or fax which includes a reference to the solicitation and amendment number. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such may be made by letter or fax, provided each letter or telegram makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.								
12. Accounting and Appropriation Data (If Required) <i>To be cited on individual orders issued on behalf of participating agencies</i>								
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14								
X A. This change order is issued pursuant to (Specify Authority): 27 DCMR, Chapter 36, Section 3603 The changes set forth in Item 14 are made in the contract/order no. in item 9A.								
B. The above numbered contract/order is modified to reflect the administrative changes (such as changes in paying office, appropriation data etc.) set forth in item 14, pursuant to the authority of								
C. This supplemental agreement is entered into pursuant to authority of:								
D. Other (Specify type of modification and authority)								
E. IMPORTANT: Contractor: <input type="checkbox"/> is not <input checked="" type="checkbox"/> is required to sign this document and return 4 copies at the time of proposal submission.								
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible)								
Pursuant to Article 3, Changes Clause of the Standard Contract Provisions for the use with District of Columbia Government Supply and Services Contracts dated March 2007, the subject solicitation is hereby amended as follows:								
1. Listed below is the response to questions that was submitted to the Office of Contracting and Procurement in writing as Request for Information, RFI Q193 through Q207.								
Except as provided herein, all terms and conditions of the document is referenced in Item 9A or 10A remain unchanged and in full force and effect.								
15A. Name and Title of Signer (Type or print)				16A. Name of Contracting Officer				
				Jean Wright				
15B. Name of Contractor		15C. Date Signed		16B. District of Columbia		16C. Date Signed		
(Signature of person authorized to sign)				Donna Trucco for		8/13/09		
				(Signature of Contracting Officer)				

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14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible).

Q193

Question: p. 5 – Performance measure B.4.1.1.2: clients receive appointment and are admitted – how does contractor control clients actual admission to treatment program? Especially if have supposed to discharge within 3-5 days as in performance measure B.4.2.1.3 (p. 6).

Response: The identified performance measures are based on factors that are known in the empirical literature to enhance client retention and completion of treatment. In addition, provision of substance abuse treatment services is the only means by which Drug Treatment Choice Program (DTCP) treatment providers receive payment. The DTCP is the District's publically supported substance abuse treatment program wherein treatment counselors assess eligible participants for substance use disorder, determine the clinically appropriate level of care for treatment, and refer the client to the treatment provider of his or her choice within the DTCP network. DTCP providers are provided a voucher which authorizes them to provide treatment services on a fee-for-service basis. This fee-for-service model incentivizes client care and retention. Offerors are encouraged to be creative in implementing internal mechanisms and partnering with 3rd party treatment providers in achieving performance goals. These measures could include, but are not limited to, establishing care coordination and case management services, performing weekly case reviews, establishing memoranda of understandings with treatment providers, periodic conferences and utilization reviews with treatment providers, and utilization of services available to facilitate and support active and sustained client participation in treatment (such as through the Access to Recovery program).

Q194

Question: p. 5 – Performance measure B.4.1.1.4: post treatment clients re-assessed and referred – what is a post-treatment client?

Response: Performance measure B.4.1.1.4 has been revised to read: "At least 50% of clients who complete an assessment are referred to recovery support services."

Q195

Question: p. 6 – Performance measure B.4.2.1.4: clients admitted to outpatient – how ensure they have 2 treatment sessions within first 2 weeks? – would almost have to intensively case manage?

Response: The identified performance measures are based on factors that are known in the empirical literature to enhance client retention and completion of treatment. In addition, provision of substance abuse treatment services is the only means by which Drug Treatment Choice Program (DTCP) treatment providers receive payment. The DTCP is the District's publically supported substance abuse treatment program wherein treatment counselors assess eligible participants for substance use disorder, determine the clinically appropriate level of care for treatment, and refer the client to the treatment provider of his or her choice within the DTCP network. DTCP providers are provided a voucher which authorizes them to provide treatment services on a fee-for-service basis.

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This fee-for-service model incentivizes client care and retention. Offerors are encouraged to be creative in implementing internal mechanisms and partnering with 3rd party treatment providers in achieving performance goals. These measures could include, but are not limited to, establishing care coordination and case management services, performing weekly case reviews, establishing memoranda of understandings with treatment providers, periodic conferences and utilization reviews with treatment providers, and utilization of services available to facilitate and support active and sustained client participation in treatment (such as through the Access to Recovery program).

Q196

Question: p. 6 – Performance measure B.4.2.1.5: clients admitted to residential treatment – how ensure a length of stay of 30 days?

Response: The identified performance measures are based on factors that are known in the empirical literature to enhance client retention and completion of treatment. In addition, provision of substance abuse treatment services is the only means by which Drug Treatment Choice Program (DTCP) treatment providers receive payment. The DTCP is the District's publically supported substance abuse treatment program wherein treatment counselors assess eligible participants for substance use disorder, determine the clinically appropriate level of care for treatment, and refer the client to the treatment provider of his or her choice within the DTCP network. DTCP providers are provided a voucher which authorizes them to provide treatment services on a fee-for-service basis. This fee-for-service model incentivizes client care and retention. Offerors are encouraged to be creative in implementing internal mechanisms and partnering with 3rd party treatment providers in achieving performance goals. These measures could include, but are not limited to, establishing care coordination and case management services, performing weekly case reviews, establishing memoranda of understandings with treatment providers, periodic conferences and utilization reviews with treatment providers, and utilization of services available to facilitate and support active and sustained client participation in treatment (such as through the Access to Recovery program).

Q197

Question: p. 9 – Performance measure 4: 90-100% of clients referred to outpatient – example shows 18 clients as minimum number = 22.5%?

Response: The example states that 20 clients were referred to outpatient treatment during the month. 90% of 20 is 18.

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Q198

Question: p. 11 – Definition Sobering Program C.1.2.8: “serves individuals in need of a secure setting” – how secure is setting expected to be? Locked? Can people leave at any time?

Response: “Secure setting” is intended to mean safe, not locked. Substance abuse treatment supported by APRA is voluntary.

Q199

Question: p. 15 – Preferential hiring C.4.8: interviewing and hiring incumbent staff – are incumbent staff unionized?

Response: Yes. However, union membership does not transfer with any existing employee who is hired by the contractor following award of the contract.

Q200

Question: p. 21 – Referral of clients to APRA continuum of care C.6.23: clients therapeutically discharged or otherwise not completing treatment must be reassessed for placement – many are likely to be uncooperative – how to get someone reassessed and placed who’s intent on leaving against advice?

Response: This section applies to the DSC, not assessment and referral services. Clients are to be referred to continued treatment within the APRA continuum of care following successful completion of treatment at the DSC as specified in Amendment No. A001 dated June 29, 2009.

Offerors are encouraged to be creative in implementing internal mechanisms and partnering with 3rd party treatment providers in achieving performance goals.

Q201

Question: p. 21 – Staffing ratios C.7.1.2: – is Certified Addictions Counselor (with capitalization) different from certified counselor (no caps) earlier in same sentence?

Response: Section C.7.1.2 will be amended to read as follows: At least one full time licensed counselor or certified counselor for every 8 clients in the non hospital detoxification program.

The contractor must meet the requirements of the RFP with respect to counselor to client ratios. In addition, the contractor must employ appropriately credentialed counselors based on the requirements in the District of Columbia Health Occupations Revision Act of 1985 and Title 29, Chapter 23 of the District of Columbia Municipal Regulations.

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14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible).

Q202

Question: p. 21 – Licensed nursing staff C.7.1.3: – are RNs required beyond the requirement for a qualified RN as director of nursing? YES – see C.7.4

Response: The nursing requirement for the Detoxification and Stabilization center are as follows:

- (1) RFP Section C.7.1.3 requires that the contractor have in place “Licensed nursing staff to meet the requirements of 29 DCMR 2364 and provide nursing services to clients 24 hours per day, seven days per week in the facility. The Contractor shall designate a registered nurse to be a full time Director of Nursing and responsible for nursing care in the programs.”
- (2) 29 DCMR 2364 requires that “The number of licensed nursing staff shall be commensurate with the number of patients being served. The patient: nurse ratio on the day shift shall not exceed 12:1; on the evening shift 17:1; and on the night shift 25:1.”
- (3) RFP Section C.7.4 states that “The Contractor shall develop a plan to be submitted to the COTR within 30 days after contract award for approved by the Senior Deputy Director of APRA ensuring that at a minimum one registered nurse and one licensed practical nurse are on duty at the Detoxification and Stabilization Center at all times. The Contractor shall ensure that at least two staff members certified to perform CPR are on duty at all times.”

Q203

Question: p. 32 – Hiring district residents H.1: what is meaning of hiring 51% residents as “apprentices and trainees . . . registered in programs approved by the DC Apprenticeship Council”? How do apprentices and trainees relate to required staffing of detox center and assessment & referral services?

Response: This is a standard clause applicable only to new employees hired for “apprentices and trainees” contract.

Q204

Question: p. 35 – District provides limited furniture and equipment H.9.1: specifically what furniture and equipment will be provided?

Response: APRA will provide under separate cover an inventory of office furniture whose use will convey for the term of the contract. However, computers, copiers, and printers are the property of the District government and will be removed.

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14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible).

Q205

Question: p. 41 – Displaced employees hired by contractor H.14.2: what are the benefits provided by the Service Contract Act of 1965?

Response: For further information pertaining to the benefits provided by the Service Contract Act of 1965 (79 Stat. 1034; 41 U.S.C.S. § 351 et seq) review the Department of Labor website at: www.dol.gov/compliance/laws/comp-sca.htm.

Q206

Question: p. 61 – License, registration, certification L.19.2: bidder certifying its intent to obtain them prior to award – must be in place at time of award or is there time to complete the process?

Response: It is estimated that the process to obtain a basic business license should take no more than two weeks. If the offeror is not licensed in the District, the offeror must submit an intent to obtain the appropriate licenses prior to the awarding of the contract. For more information go to the Department of Consumer and Regulatory Affairs website at: <http://dcra.dc.gov/dcra/site/default.asp>.

Q207

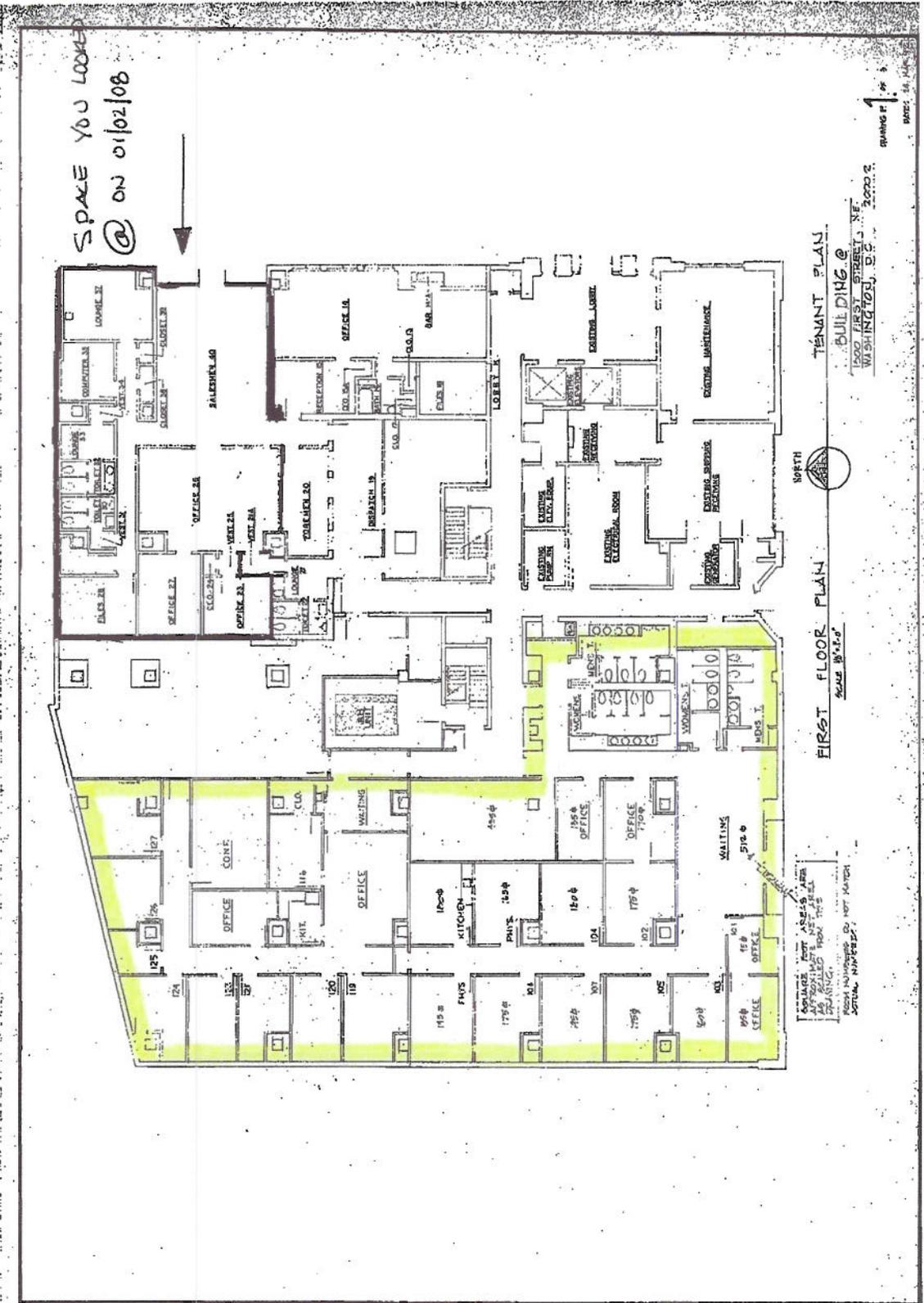
Question: Are there floor plans available for the detox/sobering unit and the assessment & referral unit?

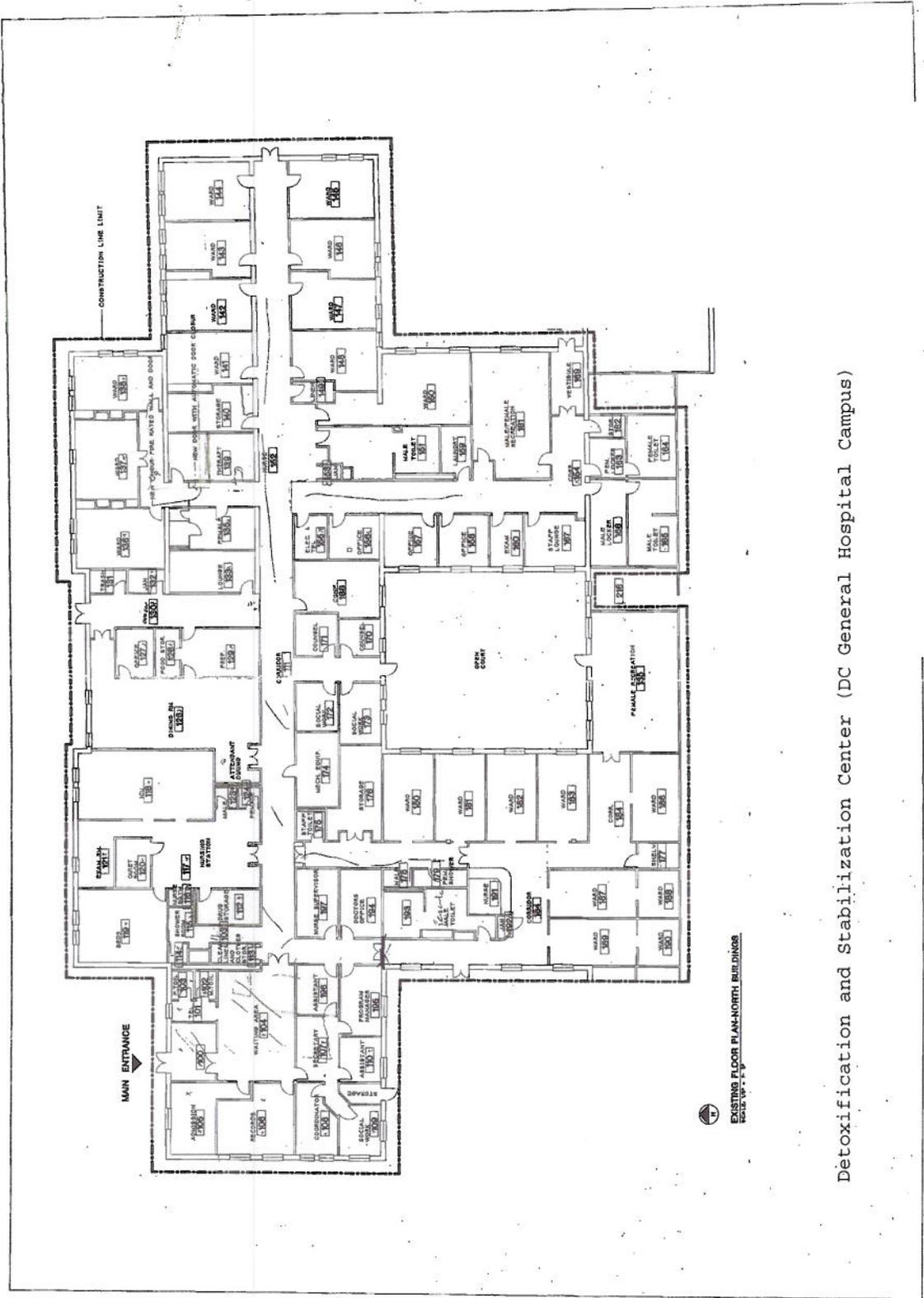
Response: Yes. The floor plans were distributed at the pre-proposal conference on July 15th. Attached to this amendment are the floor plans.

ATTACHMENT

FLOOR PLANS

The assessment and referral center located at 1300 1st Street NE (highlighted on left).





Detoxification and Stabilization Center (DC General Hospital Campus)

EXISTING FLOOR PLAN-NORTH BUILDING
 10/17/77