

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT				1. Contract Number		Page of Pages	
						1	4
2. Amendment/Modification Number A001		3. Effective Date May 14, 2013		4. Requisition No.		5. Solicitation Caption DDS Clinicians/Therapists	
6. Issued by: Department on Disability Services Office of Contracts and Procurement 1125 15 th Street NW, 4 th Floor Washington, DC 20005-2720				Code JM0MH		7. Administered by (If other than line 6)	
8. Name and Address of Contractor (No. street, city, county, state and zip code)				X		9A. Amendment of Solicitation No. DCJM-2013-R-0017	
						9B. Dated (See Item 11) May 1, 2013	
						10A. Modification of Contract/Order No.	
						10B. Dated (See Item 13)	
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. Offerors 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>one</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)							
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTORS/ORDERS , IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14							
A. This change order is issued pursuant to (Specify Authority): THE CHANGES CLAUSE, The changes set forth in Item 14 are made in the contract/order no. in item 10A.							
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 27 DCMR, Chapter 36, Section 3601.2.							
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 type="checkbox"/> is required to sign this document and return <u>one</u> copy to the issuing office.							
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.) Request for Proposals (RFP) No. DCJM-2013-R-0017 for DDS Clinicians/Therapists is hereby amended to respond to questions and make other changes as set forth on the following pages 2 through 4.							
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 Janice Parker Watson			
15B. Name of Contractor		15C. Date Signed		16B. District of Columbia 		16C. Date Signed 5/15/13	
(Signature of person authorized to sign)				(Signature of Contracting Officer)			

Responses to Solicitation Questions
(The **response** to each question is highlighted in **blue**.)

- 1) Has the Department on Disability Services ever contracted for these positions in the past?

Yes.

- 2) If so, were you happy with the agency that you worked with in the past?

The services have been performed satisfactorily.

- 3) What were the rates from the previous agency for each of the disciplines?

The current and expiring hourly rates are as follows:

Physical Therapist - \$81.93, Occupational Therapist- \$83.47, Speech Language Pathologist - \$89.30, Nutritionist - \$65.45, Advanced Practice Nurse - \$107.65 and Ph.D Clinical Psychologist who holds certification as a Certified Behavior Analyst - \$113.02.

- 4) Will most of the work provided by therapists and clinicians be in a home based setting or a center based setting?

The therapists and clinicians will evaluate or assess DDS' clients at their residential or day program.

- 5) Is the agency able to bill and pay the therapists for a certain amount of hours per week or is this a fee for service model where the clinician can only bill if they see a patient?

The contractor will usually work and invoice for up to 40 hours per week for each clinician. This is not a fee-for-service model.

- 6) Is this a year round program?

Yes.

- 7) Based on the estimated total hours of 1840 per year, a year round schedule would mean that the therapists would be needed approximately 35 hours per week. Is this correct?

The 1840 hours is based upon a full-time equivalent schedule, which excludes holidays, annual and sick leave hours that are paid from fringe benefits.

- 8) If there is travel involved for the therapists, can you describe what cities and how many locations they might travel to, in a given day. Approximate information here will allow us to better determine the travel cost.

All travel is local in and around the District of Columbia or Maryland suburbs. We estimate the travel not-to-exceed \$7500 annually per clinician to be reimbursed at rates not-to-exceed Privately Owned Vehicle (POV) Mileage Reimbursement Rates set forth in the Federal Travel Regulation (currently \$0.565 per mile).

- 9) In reference to DDS training requirements, will the Government be providing the training, or must the Contractor procure the training?

The District will provide the DDS training.

- 10) In reference to the “on-site Team Leader (Lead Clinician),” is this a separate staffing requirement from either the “Ph.D. Clinical Psychologist who holds certification as a Certified Behavior Analyst, Physical Therapist, Occupational Therapist, Advanced Practice Registered Nurse or Family Nurse Practitioner, Speech Language Therapist and Nutritionist,” or is the Contractor responsible for making one of these 6 clinicians the “Team Leader”?

The contractor is responsible for designating one of the six (6) clinicians as the Team Leader.

- 11) If this is a separate staffing requirement, what are the qualifications necessary for this position?

This is not a separate staffing requirement, however, the team leader should have management experience.

- 12) There is a required subcontracting plan for contracts in excess of \$250,000. At least 35% of the dollar volume shall be subcontracted to a certified small business enterprise. Section H.13 outlines the requirements for the SBE. In this Section, there is reference to Sections H.9.1.1 and H.9.1.2 but there is no Section H.9.1.1 or H.9.1.2 in the RFP. Could you please send a copy of the missing items?

The reference is corrected to refer to Sections H.13.1.1 and H.13.1.2.

- 13) **The requirement throughout the solicitation for the Ph.D. Clinical Psychologist to hold certification as a Certified Behavior Analyst is hereby eliminated.**

- 14) **Add to Section G, the following clause:**

G.12 COST REIMBURSEMENT CEILING

G.12.1 Cost reimbursement ceiling for this contract is set forth in Section B.4.

G.12.2 The costs for performing this contract shall not exceed the cost reimbursement ceiling specified in Section B.4.

- G.12.3** The Contractor agrees to use its best efforts to perform the work specified in this contract and to meet all obligations under this contract within the cost reimbursement ceiling.
- G.12.4** The Contractor must notify the CO, in writing, whenever it has reason to believe that the total cost for the performance of this contract will be either greater or substantially less than the cost reimbursement ceiling.
- G.12.5** As part of the notification, the Contractor must provide the CO a revised estimate of the total cost of performing this contract.
- G.12.6** The District is not obligated to reimburse the Contractor for costs incurred in excess of the cost reimbursement ceiling specified in Section B.4, and the Contractor is not obligated to continue performance under this contract (including actions under the Termination clauses of this contract), or otherwise incur costs in excess of the cost reimbursement ceiling specified in Section B.4, until the CO notifies the Contractor, in writing, that the estimated cost has been increased and provides revised cost reimbursement ceiling for performing this contract.
- G.12.7** No notice, communication, or representation in any form from any person other than the CO shall change the cost reimbursement ceiling. In the absence of the specified notice, the District is not obligated to reimburse the Contractor for any costs in excess of the costs reimbursement ceiling, whether such costs were incurred during the course of contract performance or as a result of termination.
- G.12.8** If any cost reimbursement ceiling specified in Section B.4 is increased, any costs the Contractor incurs before the increase that are in excess of the previous cost reimbursement ceiling shall be allowable to the same extent as if incurred afterward, unless the CO issues a termination or other notice directing that the increase is solely to cover termination or other specified expenses.
- G.12.9** A change order shall not be considered an authorization to exceed the applicable cost reimbursement ceiling specified in Section B.4, unless the change order specifically increases the cost reimbursement ceiling.
- G.12.10** Only costs determined in writing to be reimbursable in accordance with the cost principles set forth in rules issued pursuant to Title VI of the D.C. Procurement Practices Act of 1985 shall be reimbursable.