



**DISTRICT OF COLUMBIA DEPARTMENT OF MENTAL HEALTH
CONTRACTS AND PROCUREMENT ADMINISTRATION
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AUGUST 24, 2010

**DEPARTMENT OF MENTAL HEALTH/EVIDENCE-BASED SUPPORTED EMPLOYMENT
REQUEST FOR PROPOSAL AMENDMENT NUMBER ONE (1)
RM-11-RFP-042-BY4-TLW**

TO ALL PROSPECTIVE OFFERORS:

**THIS AMENDMENT ANSWERS QUESTIONS SUBMITTED BY PROSPECTIVE
OFFERORS AND AMENDS CERTAIN SECTIONS OF THIS REQUEST FOR PROPOSALS
(RFP)**

Question Number	RFP Section	Question
Question 1	B.4 Item Description	B.4 <i>Question:</i>
DMH RESPONSE: Please replace Item Description in its entirety as follows: Item Description indicates: Item Description: The District of Columbia Department of Mental Health (DMH) is seeking Qualified Mental Health Rehabilitation Services Contractors to provide Evidence-Based Supported Employment Services for the DMH Consumers Eighteen (18) years of age and over with serious mental illness or serious emotional disturbance in accordance with the District's laws and regulations. The Contractor shall indicate the maximum capacity of Annual Units instead of Annual Hours to coincide and match the established 15 Minute (Quarter Hourly) Rate for a Period of Performance of One (1) Year from Date of Award with Four (4) One Year Option Periods.		
Question 2	C.4.2	C.4.2 indicates that: The Contractor shall employ at least two (2) employment specialist who shall only provide Evidence-Based Supported employment Services and manage caseloads of up to 20 consumers. <i>QUESTION: Is the ratio of staffer to consumers always to be 20 to 1 no matter how great the total number of consumers?</i>
DMH RESPONSE: Please replace Section C.4.1 in its entirety with: The Contractor shall employ a minimum of at least two (2) Employment Specialists who shall provide Evidence-Based Supported Employment Services and manage caseloads of up to 20 consumers each. Regardless of the number of Consumers, the ratio of Consumers to Employment Specialist shall never exceed twenty to one (20 to 1).		

Question Number	RFP Section	Question
Question 3	C.4.9	<p>C.4.9 indicates that: The Contractor shall collect Evidence-Based Supported Employment outcome information and provide such data to DMH monthly. Core outcome data to be collected involves: a. Number of Consumers served; b. Number of Consumers employed; c. Number of Consumers referred to Rehabilitation Services Administration (RSA); d. Hours worked; e. Wages earned; f. Types of jobs held by Consumers; g. Number of Consumers participating in education programs</p> <p>QUESTION: Should the collected of Evidence-Based Supported Employment outcome information be supplied to DMH more frequently than monthly?</p>
<p>DMH RESPONSE: Please replace C.4.9 in its entirety with: The Contractor shall collect Evidence-Based Supported Employment outcome information and provide such data to DMH monthly. Core outcome data to be collected involves: a. Number of Consumers served; b. Number of Consumers employed; c. Number of Consumers referred to Rehabilitation Services Administration (RSA); d. Hours worked; e. Wages earned; f. Types of jobs held by Consumers; g. Number of Consumers participating in education programs. Request for information shall be required as needed by DMH in addition to the monthly outcome information reports.</p>		
Question Number	RFP Section	Question
Question 4	G.2 thru G.2.2.8	<p>G.2 <u>SUBMISSION OF INVOICES</u></p> <p>G.2.1 The Contractor shall submit, on a monthly basis, an original and three copies of each invoice to the Department of Mental Health, Accounts Payable Office at 64 New York Ave., NE, 6th Floor Washington, DC 20002 or by e-mail to dmh.ap@dc.gov. The invoices shall include Contractor’s name and address, invoice date, Contract number, Contract line items numbers (CLINS), description of the services, quantity, unit price and extended prices, terms of any prompt payment discounts offered, name and address of the official to whom payment is to be sent and the name, title and phone number of the person to be notified in the event of a defective invoice. Payment shall be made within Thirty (30) days after the Accounts Payable Office receives a proper invoice from the Contractor which has been certified to be correct by the COTR, unless discount for prompt payment is offered and payment is made within the discount periods. Please note that the invoice shall match the itemized lines (CLIN Lines) of the Purchase Order as written up to but not exceeding the maximum of each line. Any invoices deemed improper for payment shall be returned <u>UNPAID</u> and shall be resubmitted as indicated in this clause.</p> <p>G.2.2 To constitute a proper invoice, the Contractor shall submit the following information on the invoice:</p> <p>G.2.2.1 Contractor’s name, Federal tax ID, DUNS number and invoice date (Contractors are encouraged to date invoices as close to the date of mailing or transmittal as possible.);</p>

		<p>G.2.2.2 Contract number, block number eleven (11) and encumbrance number, block number seven (7) of the Solicitation Cover Sheet. Assignment of an invoice number by the Contractor is also recommended;</p> <p>G.2.2.3 Description, price, quantity and the date(s) that the supplies/services were actually delivered and/or performed;</p> <p>G.2.2.4 Other supporting documentation or information, as required by the Contracting officer;</p> <p>G.2.2.5 Name, title, telephone number and complete mailing address of the responsible official to whom payment is to be sent;</p> <p>G.2.2.6 Name, title, phone number of person preparing the invoice;</p> <p>G.2.2.7 Name, title, phone number and mailing address of person (if different from the person identified in (G.2.2.6) above to be notified in the event of a defective invoice); and</p> <p>G.2.2.8 Authorized signature</p>
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DMH RESPONSE: The DMH requires all invoicing for Evidence-Based Supportive Employment Services to be submitted through the eCura Billing System. No paper invoices shall be accepted and processed. Please replace Section G.2 through G.2.2.8 in its entirety with:

G.2 SUBMISSION OF INVOICE

G.2.1 BILLING AND PAYMENT

G.2.1.1 CLAIMS SUBMISSION REQUIREMENTS

G.2.1.2 All Supported Employment claims must be submitted electronically using the eCura system utilizing the following code: H203. eCura’s NSF file layout is based on QuickLink Statewide Health Network Electronic Media Claims National Standard Format, National Version 02.00, Local Version 02.00. More detailed information on each record type can be found there. Claims must conform to a format that is currently specified, accepted, and supported by DMH consistent with the Administrative Simplification Provisions of the Health Insurance Portability and Accountability Act (HIPAA).

G.2.1.3 When a specific Supported Employment service is rendered multiple times in a single day, the service must be billed using multiple units rather than as separate line items.

G.2.1.4 The Authorization Plan number produced by eCura must be submitted within the claim. The Authorization Plan number will be used to evaluate the dates of service, procedure code, and rendering provider on the claim against what was submitted on the authorization plan.

G.2.1.5 Provider shall submit all Supported Employment claims within sixty (60) days from the date the service was rendered.

- G.2.1.6** Reimbursement for services provided under this Agreement may be suspended if Provider fails to submit or make available for inspection any information required in Sections G.1 through G.4 of this Agreement.
- G.2.1.7** Payment from DMH for any Supported Employment service constitutes payment in full. Provider may not bill the Consumer for any difference between DMH's payment and Provider's charge for the service. Provider may not charge the Consumer any co-payment, cost-sharing or similar charge. Provider may not charge the Consumer any down payment whatsoever.
- G.2.1.8** Provider understands and agrees that payments for Supported Employment provided pursuant to the Agreement are contingent upon the availability of appropriated funds. If DMH, the DHCF, or the District of Columbia government, disapproves of or ceases to continue funding to DMH for payments due hereunder, the Agreement is terminated as of the date funding expires without notice or further obligation of DMH, except that, as soon as DMH is notified that funding shall cease, DMH will immediately provide written notice to Provider.
- G.2.1.9** Provider shall prepare and provide proper clinical documentation in accordance with applicable District and federal laws and regulations for all Consumer records to justify Supported Employment claims.
- G.2.1.10** DMH shall not make reimbursement to the provider in excess of the total amount available on the Provider's - Purchase Order, unless such reimbursement is required under applicable law.

Question Number	RFP Section	Question
Question 5	L.2	<p data-bbox="542 1209 1438 1241">L.2 <u>PROPOSAL FORM, ORGANIZATION AND CONTENT</u></p> <p data-bbox="643 1283 1588 1535">One original and five (5) copies of the written proposals shall be submitted in two parts, titled "Technical Proposal" and "Price Proposal". Proposals shall be typewritten in 12 point font size on 8.5" by 11" bond paper. Telephonic and telegraphic proposals shall not be accepted. Each proposal shall be submitted in a sealed envelope conspicuously marked: <i>"Proposal in Response to Solicitation No. RM-11-RFP-042-BY4-TLW; Evidence-Based Supported Employment Services;</i></p> <p data-bbox="761 1572 1187 1604" style="text-align: center;"><i>(Insert Your Company's Name)</i></p> <p data-bbox="643 1646 1576 1961">Offerors are directed to the specific proposal evaluation criteria found in Section M of this Solicitation, EVALUATION FACTORS FOR AWARD. The Offeror shall respond to each factor in a way that shall allow the District to evaluate the Offeror's response. The Offeror shall submit information in a clear, concise, factual and logical manner providing a comprehensive description of program services and service delivery. The information requested below for the technical proposal shall facilitate evaluation and best value source selection for all proposals. The technical proposal must contain sufficient detail to</p>

		<p>provide a clear and concise representation of the requirements in the statement of work.</p> <ol style="list-style-type: none"> 1. Technical Understanding of the requirement and approach 2. Management Plan 3. Quality Improvement Plan 4. Personnel 5. Past Performance
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DMH RESPONSE: L.2 Replace Section L.2 in its entirety with:

PROPOSAL FORM, ORGANIZATION AND CONTENT

One original and five (5) copies of the written proposals shall be submitted in two parts, titled "Technical Proposal" and "**Price Supporting Explanation**". Proposals shall be typewritten in 12 point font size on 8.5" by 11" bond paper. Telephonic and telegraphic proposals shall not be accepted. Each proposal shall be submitted in a sealed envelope conspicuously marked: "**Proposal in Response to Solicitation No. RM-11-RFP-042-BY4-TLW; Evidence-Based Supported Employment Services;**

_____.
 (*Insert Your Company's Name*)

Offerors are directed to the specific proposal evaluation criteria found in Section M of this Solicitation, **EVALUATION FACTORS FOR AWARD**. The Offeror shall respond to each factor in a way that shall allow the District to evaluate the Offeror's response. The Offeror shall submit information in a clear, concise, factual and logical manner providing a comprehensive description of program services and service delivery. The information requested below for the technical proposal shall facilitate evaluation and best value source selection for all proposals. The technical proposal must contain sufficient detail to provide a clear and concise representation of the requirements in the statement of work.

1. Technical Understanding of the requirement and approach
2. Management Plan
3. Quality Improvement Plan
4. Personnel
5. Past Performance

Question Number	RFP Section	Question
6	L.8	L.8 <u>SIGNING OF OFFERS</u>

		<p>The Contractor shall sign the offer and print or type its name on the Solicitation, Offer and Award form of this solicitation. Erasures or other changes must be initialed by the person signing the offer. Offers signed by an agent shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the Contracting Officer.</p>
<p>DMH RESPONSE: Replace Section L.8 in its entirety with: The Offeror shall sign the Offer in Blue Ink and Print or Type the Name of the Offeror, along with the Name and Title of the Person Authorized to Sign the Offer in blocks 14, 14A, 15 and 15A of Section A, Solicitation, Offer and Award form, page one of this Solicitation. The Offeror's Solicitation submission must be <u>signed in Blue Ink</u> by an authorized negotiator as identified in Section K.1 of your submission. DMH shall not under any circumstances accept a submission signed by someone other than an authorized negotiator, nor submitted with either an electronic signature, a signature stamp, a color copy of a signature, or anything other than an original signature in Blue Ink by an authorized negotiator. Furthermore, wherever any other part of the solicitation requires you to submit a document with a signature (<i>e.g.</i> Section K.3-Certification as to Compliance with Equal Opportunity Obligations, Tax Certification Affidavit, First Source Employment Agreement), only an original signature by an authorized negotiator, in Blue Ink shall be accepted by DMH. Erasures or other changes must be initialed by the person signing the Offer. Offers signed by an agent shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the Director/ACCO.</p>		

Question Number	RFP Section	Question
Question 7	L.17.2	L.17.2 Impromptu questions shall be permitted and spontaneous answers shall be provided at the District’s discretion. Verbal answers given at the pre-proposal conference are only intended for general discussion and do not represent the District’s formal position. All questions must be submitted in writing to the Director, Contracts and Procurement/Agency Chief Contracting Officer following the close of the Pre-Proposal Conference in order to generate a formal answer, but in any event, no fewer than five (5) days prior to the date set for receipt of proposals. Answers shall be provided in writing to all prospective Offerors who are listed on the official Offerors’ list as having received a copy of the Solicitation and shall be issued as an Amendment to the solicitation.

DMY RESPONSE: Replace Section L.17.2 in its entirety with:
 L.17.2 Impromptu questions shall be permitted and spontaneous answers shall be provided at the District’s discretion. Verbal answers given at the pre-proposal conference are only intended for general discussion and do not represent the District’s formal position. **All questions must be submitted in writing to the Director, Contracts and Procurement/Agency Chief Contracting Officer following the close of the Pre-Proposal Conference in order to generate a formal answer.** Answers shall be provided in writing to all prospective Offerors who are listed on the official Offerors’ list as having received a copy of the Solicitation, and shall be issued as an Amendment to the solicitation.

Question Number	RFP Section	Question
Question 8	M.3.C	C. <u>EVALUATION FACTOR: QUALITY IMPROVEMENT PLAN 0–10 POINTS</u> <ul style="list-style-type: none"> • Demonstrate how a variety of sources, including but not limited to, consumer satisfaction surveys, community service review results, and routine oversight and monitoring activities shall be used to monitor consumer satisfaction and overall program effectiveness.

DMH RESPONSE: Replace M.3.C in its entirety with:
C. EVALUATION FACTOR: QUALITY IMPROVEMENT PLAN 0–15 POINTS

- Demonstrate how a variety of sources, including but not limited to, consumer satisfaction surveys, community service review results, and routine oversight and monitoring activities shall be used to monitor consumer satisfaction and overall program effectiveness.

Question Number	RFP Section M.3.D	Question
Question 9		<p>D. <u>EVALUATION FACTOR: PERSONNEL</u> 0 – 10 Points</p> <ul style="list-style-type: none"> • Possess the organizational resources, capability and experience to provide Evidence-Based Supported Employment program workforce and replacements, when needed, for an effort of this scope. • Staff demonstrates the expertise and qualifications to successfully accomplish the requirements outlined in Section C. • Provide Resumes of Program Administrator, Supported Employment Manager/Supervisors and Employment Specialists.

DMH RESPONSE: Replace Section M.3.D in its entirety with:

D. EVALUATION FACTOR: PERSONNEL 0 – 15 Points

- Possess the organizational resources, capability and experience to provide Evidence-Based Supported Employment program workforce and replacements, when needed, for an effort of this scope.
- Staff demonstrates the expertise and qualifications to successfully accomplish the requirements outlined in Section C.
- Provide Resumes of Program Administrator, Supported Employment Manager/Supervisors and Employment Specialists

Question Number	RFP Section M.4	Question
Question 9		<p>M.4. <u>PRICE CRITERIA</u> 0 – 10 Points</p> <ul style="list-style-type: none"> • The Price Evaluation shall be objective. The prospective Offeror with the lowest cost/price shall receive the maximum price points. All other proposals shall receive a proportionately lower score. The following formula shall be used to determine each Offeror’s evaluated cost/price score: $\frac{\text{Lowest cost/price proposal} \times \text{weight}}{\text{Cost/price of proposal being evaluated}} = \text{evaluated cost/price score}$

DMH RESPONSE: Delete Section M.4 in its entirety.

ALL OTHER TERMS AND CONDITIONS OF THE REQUEST FOR QUOTE REMAIN UNCHANGED.

Only one copy of this amendment is being sent to prospective Offerors. Offerors shall sign below and attach a signed copy of this amendment to each RFP to be submitted to the place specified for receipt of RFP. Requests for Quotes shall be mailed or delivered in accordance with the instructions provided in the original RFP. In the event your RFP has been previously deposited with the Department of Mental Health, Contracts and Procurement Administration (DMH/CPA), submit this signed Amendment in a sealed envelope, identified on the outside by the RFP number and submission date. This signed Amendment must be received by the DMH/CPA no later than the date and time for closing.

Failure to acknowledge receipt of Amendment One (1) for Solicitation Number RM-11-RFP-042BY4-TW may be cause for rejection of any quote submitted in response to the subject RFP.

Signed:

Samuel J. Feinberg, CPPO, CPPB
Director, Contracts and Procurement
Agency Chief Contracting Officer

Amendment Number One (1) is hereby acknowledged and is considered a part of the quote for Solicitation Number RM-11-RFP-042-BY4-TLW.

Signature of Authorized Representative

Date

Title of Authorized Representative

Print or Type Name of Offeror