



State of South Carolina

Invitation For Bid Amendment No. One

Solicitation: 5400012226
 Date Issued: October 27, 2016
 Procurement Officer: REBECCA NICHOLS
 Phone: 803-898-1262
 E-Mail Address: NICHOLRJ@dhec.sc.gov

DESCRIPTION: Turn-Key services of Long-Term Care Survey Teams to conduct CMS Recertification/Revisit/Complaint Surveys at Long Term Care Facilities identified by DHEC

USING GOVERNMENTAL UNIT: SC Dept of Health & Environmental Control

The Term "Offer" Means Your "Bid" or "Proposal". Unless submitted on-line, your offer must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior. See "Submitting A Paper Offer or Modification" provision.

**SUBMIT YOUR OFFER ON-LINE AT THE FOLLOWING URL: <http://www.procurement.sc.gov>
(See Pages 3 and 4 for instructions)**

SUBMIT YOUR SEALED (if submitting paper) OFFER TO EITHER OF THE FOLLOWING ADDRESSES

MAILING ADDRESS:

SC DHEC – Division of Procurement Services
 Bureau of Business Management
 Columbia Mills Building, 301 Gervais Street
 Columbia, S.C. 29201-3073

PHYSICAL ADDRESS:

SCDHEC - Division of Procurement Services - Bureau of Business Management
 Columbia Mills Building – 4th Floor
 301 Gervais Street
 Columbia, S.C. 29201

Please call the procurement officer listed above or call information at (803) 898-3501 prior to delivery of a bid.

SUBMIT OFFER BY (Opening Date/Time): 11 / 08 / 2016 2:30PM ET (See "Deadline For Submission Of Offer" provision)

QUESTIONS MUST BE RECEIVED BY: **CLOSED** (See "Questions From Offerors" provision)

NUMBER OF COPIES TO BE SUBMITTED: Online Preferred -- One (1) copy if submitting paper bid.

CONFERENCE TYPE: Not Applicable
DATE & TIME:

(As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions)

LOCATION: Not Applicable

AWARD & AMENDMENTS

Award will be posted on **11 / 10 / 2016**. The award, this solicitation, any amendments, and any related notices will be posted at the following web address: <http://www.procurement.sc.gov>

You must submit a signed copy of this form with Your Offer. By signing, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of thirty (30) calendar days after the Opening Date.
 (See "Signing Your Offer" provision.)

NAME OF OFFEROR

(full legal name of business submitting the offer)

Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.

AUTHORIZED SIGNATURE

(Person must be authorized to submit binding offer to contract on behalf of Offeror.)

DATE SIGNED

TITLE

(business title of person signing above)

STATE VENDOR NO.

(Register to Obtain S.C. Vendor No. at www.procurement.sc.gov)

PRINTED NAME

(printed name of person signing above)

STATE OF INCORPORATION

(If you are a corporation, identify the state of incorporation.)

OFFEROR'S TYPE OF ENTITY: (Check one)

(See "Signing Your Offer" provision.)

Sole Proprietorship Partnership Other _____
 Corporate entity (not tax-exempt) Corporation (tax-exempt) Government entity (federal, state, or local)

PAGE TWO

(Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business)	NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)
	Area Code - Number - Extension Facsimile
	E-mail Address

PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)	ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)
<input type="checkbox"/> Payment Address same as Home Office Address	<input type="checkbox"/> Order Address same as Home Office Address
<input type="checkbox"/> Payment Address same as Notice Address (check only one)	<input type="checkbox"/> Order Address same as Notice Address (check only one)

ACKNOWLEDGMENT OF AMENDMENTS
 Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)

Amendment No.	Amendment Issue Date						

DISCOUNT FOR PROMPT PAYMENT (See "Discount for Prompt Payment" clause)	10 Calendar Days (%)	20 Calendar Days (%)	30 Calendar Days (%)	_____ Calendar Days (%)
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PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at www.procurement.sc.gov/preferences. ***ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT. VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES.*** [11-35-1524(E)(4)&(6)]

PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C)(1)(i)&(ii)) or the Resident Contractor Preference (11-35-1524(C)(1)(iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).

In-State Office Address same as Home Office Address In-State Office Address same as Notice Address (check only one)

AMENDMENT NO. ONE
Invitation For Bid No. 5400012226

Description: Turn-Key services of Long-Term Care Survey Teams to conduct CMS Recertification/Revisit/Complaint Surveys at Long Term Care Facilities identified by DHEC

AMENDMENTS TO SOLICITATION (JAN 2004)

The Solicitation may be amended at any time prior to opening. All actual and prospective Offerors should monitor the following web site for the issuance of Amendments: www.procurement.sc.gov(b) Offerors shall acknowledge receipt of any amendment to this solicitation (1) by signing and returning the amendment, (2) by identifying the amendment number and date in the space provided for this purpose on Page Two, (3) by letter, or (4) by submitting a bid that indicates in some way that the bidder received the amendment. (c) If this solicitation is amended, then all terms and conditions which are not modified remain unchanged. [02-2A005-1]

THE FOLLOWING PROSPECTIVE OFFEROR QUESTIONS AND AGENCY RESPONSES ARE HEREBY INCORPORATED INTO THE SOLICITATION.

- Question 1:** Could you tell me if this is a new service and if not, who currently has this contract?
Response: **This is not a new nor current service. The previous providers were Ascellon Corporation, Healthcare Management Solutions LLC, and Providigm LLC.**
- Question 2:** How many surveys are expected to be conducted (or available to be conducted) by the Contractor during the specified contract period? Is there a minimum number of surveys that must be completed?
Response: **There is no minimum or maximum amount of surveys to be completed. We have estimated that we may need to contract roughly 20 recertification surveys and 10 complaints surveys. However, this number is dependent on current staff retention, our ability to fill vacancies, and our ability to train and certify new staff.**
- Question 3:** Section 3.5.1 states that "Recertification surveys may also include complaint surveys, if the facility being surveyed has an open complaint on file." Would the Contractor have the option of conducting only recertification surveys that do not include complaints if we request such surveys? Or is the completion of complaint surveys in conjunction with recertification surveys a requirement of the contract?
Response: **Some complaints need to be addressed on the recertification to synchronize enforcement cycles. We have worked with contactors that could not perform complaints. If the contractor could not investigate complaints, we would try to work with that contractor and assign facilities without complaints.**
- Question 4:** Will the Contractor be required to conduct licensure surveys concurrently with recertification surveys?
Response: **No, the contractor is not required to conduct licensure surveys.**
- Question 5:** How soon after the completion of recertification surveys will the final reports be due to DHEC?
Response: **The contractor will be providing QA for the report. The QA'd report is due to DHEC within 6 business days of the survey exit date. If the survey involves ongoing Immediate Jeopardy, the QA'd report is due to DHEC within 2 business days in order to meet CMS timeframes.**
- Question 6:** Reference: Page 18, Specifications 3.1.3., *The Solicitation states, "DHEC will set the schedule and assign the facility."* Is there flexibility in scheduling within a range? e.g. Is the contractor able to shift surveys one to two weeks within the schedule?
Response: **Minimal flexibility is allowed if cleared with DHEC in advance. We are working to reduce our survey interval and send the projected exit date to the contractor based CMS reports and our need to meet timeframes. We expect that the exit date will be adhered to in order to assist us to lower intervals. However, if the change does not impact our CMS Performance Standards and the**

contractor has discussed this change with us in advance, we will make every attempt to accommodate.

Question 7: Reference: Page 18, Specification 3.2.7., *The Solicitation states, "By submitting a bid the Offeror represents and agrees that all employees performing services under this contract will have Centers for Medicare and Medicaid Services (CMS) certification."*

Please confirm that this applies only to personnel conducting surveys and not management and administrative personnel.

Response: All survey staff must have successfully passed the Surveyor Minimum Qualifications Test (SMQT) and have experience in surveying Skilled Nursing Facilities and must be qualified in the Quality Indicator Survey (QIS) process. Managers that perform QA on the survey packets must also be SMQT qualified.

Question 8: Reference Page 30, PRICING DATA – AUDIT – INSPECTION (JAN 2006), *The Solicitation states, "(a) Cost or Pricing Data. Upon Procurement Officer's request, you shall submit cost or pricing data, as defined by 48 C.F.R. Section 2.10 I (2004), prior to either (1) any award to contractor pursuant to 11-35-1530 or 11-35-1560, if the total contract price exceeds \$500,000, or (2) execution of a change order or contract modification with contractor which exceeds \$100,000. Your price, including profit or fee, shall be adjusted to exclude any significant sums by which the state finds that such price was increased because you furnished cost or pricing data that was inaccurate, incomplete, or not current as of the date agreed upon between parties. (b) Records Retention. You shall maintain your records for three years from the date of final payment, or longer if requested by the chief Procurement Officer. The state may audit your records at reasonable times and places. As used in this subparagraph (b), the term "records" means any books or records that relate to cost or pricing data submitted pursuant to this clause. In addition to the obligation stated in this subparagraph (b), you shall retain all records and allow any audits provided for by 11-35-2220(2). (c) Inspection. At reasonable times, the state may inspect any part of your place of business which is related to performance of the work. (d) Instructions Certification. When you submit data pursuant to subparagraph (a), you shall (1) do so in accordance with the instructions appearing in Table 15-2 of 48 C.F.R. Section 15.408 (2004) (adapted as necessary for the state context), and (2) submit a Certificate of Current Cost or Pricing Data, as prescribed by 48 CFR Section 15.406-2(a) (adapted as necessary for the state context). (e) Subcontracts. You shall include the above text of this clause in all of your subcontracts. (f) Nothing in this clause limits any other rights of the state."*

Please confirm that offerors will be exempt from the requirements for Cost or Pricing Data under South Carolina Code of Laws Title 11, Chapter 35, Section 11-35-1830 due to paragraph 3: "Cost or Pricing Data Not Required. The requirements of this section shall not apply to contracts: (a) where the contract price is based on adequate price competition."

Response: Yes.

Question 9: Reference Page 33: RECORDS RETENTION (DHEC-MAR 2014), *The Solicitation states, "Records with respect to all matters covered by this contract shall be retained by the contractor for six (6) years after the end of the contract period, and shall be available for audit at any time such audit is deemed necessary by DHEC. If audit has begun but is not completed at the end of the six-year period, or if audit findings have not been resolved at the end of the six-year period, the records shall be retained until resolution of the audit findings."*

Please confirm that the vendor does not need to retain Survey documentation after it is submitted to the State of South Carolina.

Response: Once submitted to DHEC, survey documentation is retained by DHEC according to CMS Record retention schedules.

END AMENDMENT NO. ONE

