



---

**DISTRICT OF COLUMBIA DEPARTMENT OF MENTAL HEALTH  
CONTRACTS AND PROCUREMENT SERVICES  
64 NEW YORK AVENUE, 2<sup>ND</sup> FLOOR, WASHINGTON, DC 20002  
PHONE: (202) 671-3171 ♦ FAX: (202) 671-3395**

---

**February 14, 2013**

**INDEPENDENT COMMUNITY RESIDENTIAL FACILITY SERVICES  
HUMAN CARE AGREEMENT (HCA)  
AMENDMENT NUMBER THREE (3) – RM-13-HCA-ICRF-000-BY4-SC**

**TO ALL PROSPECTIVE OFFERORS:**

**THIS AMENDMENT HEREBY EXTENDS THE SUBMISSION DATE FROM FRIDAY, FEBRUARY 15, 2013 AT 3:00PM (EST) TO FRIDAY, FEBRUARY 22, 2013 AT 12:00NOON (EST).**

**SECTION C.6.3 DELETE IN ITS ENTIRETY AND ALL OTHER REFERENCE TO PROVIDING 1:1 SUPPORT CONTAINED IN THIS SOLICITATION.**

**QUESTIONS AND ANSWERS**

<b>Question No.</b>	<b>RFP Section</b>	<b>Question</b>
1	C.6.10 to C.6.10.2	Operator Services Requirements – Per Sections C6 – C6.10.02, it is virtually impossible to achieve these requirements with a payment of \$10 per day per person. It is also crucial to note that the Solicitation states that ICRFs are also required to provide 24-hour, one-on-one care for each Contracted Consumer residing in the ICRF. With the administrative requirements of, responding to, and the management of this Solicitation, it does not prove to be cost effective for the ICRFs to perform this Solicitation. We must remember that the ICRF Providers are already currently underfunded and are operating their facilities in a financial vacuum (We fell of the fiscal cliff many moons ago). Based on this, to implement this RFP in the fashion that it is constructed, would be Ludacris, not feasible, nor is it realistic.
<b>DMH RESPONSE: The solicitation states that providers shall be paid \$10.00 per day to provide the array of services described in this section. It should be noted that the majority of the requirements contained within this Section are required by Title 22, Chapter 38, Community Residence Facilities for Mentally Ill Persons. The additional responsibilities include: providing 1:1 supports during the course of the day; transporting or escorting consumers to and from</b>		

**routine or other appointments; ensuring that services are responsive to the ethnic, racial and cultural needs of the consumers served and cooperation with the District’s Medicaid Managed Care Programs. Our response to questions regarding each issue is as follows:**

- **\$10.00 per day Payment- This is the amount available to support the contract and shall not be increased under this solicitation.**
- **Providing 1:1 Supports – This requirement has now been eliminated from this solicitation. However, Independent CRFs who are awarded this Human Care Agreement shall be required to provide 24 hour staff supervision and assistance as mandated in Chapter 38.**
- **Transporting or Escorting Consumers To and From Routine Appointments- This requirement shall remain in the solicitation since this is critical to the consumer’s ability to maintain his/her community tenure while placed at a lower level of care.**
- **Ensuring that Services are Responsive to Ethnic, Racial and Cultural Needs- This is a best practice in mental health service delivery and is required of all DMH providers.**

Question No.	RFP Section	Question
2	H.1.1	Unreasonable Liquidated Damages and Remedy Timelines – Section H.1.1 states that “The assessment of Liquidated Damages as determined by the Director, Contracts and Procurement/ Agency Chief Contracting Officer shall be in an amount of \$100 per day where there has been failure to provide required services depicted in the Scope of Services”. Based on a \$10 per day per person compensation, ICRF Providers feel that stipulation is too severe and does not take into consideration the amount of the compensation that is being offered.

**DMH RESPONSE: This is a standard requirement in all DMH Contracts and at the discretion of the Agency Chief Contracting Officer the amount can be modified accordingly. The amount of the Liquidated Damages has been reduced from \$100 per day for failure to provide required services depicted in the Scope of Work to \$20 per day.**

Question No.	RFP Section	Question
3	H.2	Wage Determination Requirement Exceeds Solicitation Offered Funding – In Section, H2, it is stated that “The Contractor shall be bound by Wage Determination No. 2005-2081 Revision No. 12, dated 06/13/2012, issued by the US Department of Labor.” According to the Wage Determination, it was determined that we would have to pay in-house staff \$12.50 per hour. For Example consider this scenario: if an ICRF Provider has one Consumer in his facility that receives the compensation in this Solicitation of \$10 per day per person, it will cost the ICRF Provider \$300 to pay for one-on-one service of the Consumer. The compensation you are offering is \$10 per day. So, given the compensation, the ICRF Providers would be incurring an additional cost difference of \$290. If an ICRF Provider is awarded this Solicitation, it would adversely impact the delicate financial situations that the ICRF Providers are currently in. Again, the feasibility of operating this Solicitation is slim to none.

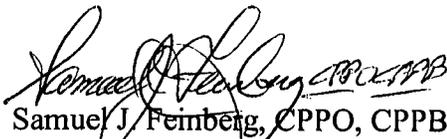
**DMH RESPONSE: This is a District law issued by the Department of Labor and DMH has no authorization to modify this requirement.**

**ALL OTHER TERMS AND CONDITIONS OF THE REQUEST FOR PROPOSALS 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 proposal to be submitted to the place specified for receipt of proposals. Proposals shall be mailed or delivered in accordance with the instructions provided in the original HCA. In the event your proposal has been previously deposited with the Department of Mental Health, Contracts and Procurement Services (DMH/CPS), submit this signed Amendment in a sealed envelope, identified on the outside by the HCA number and submission date. This signed Amendment must be received by the DMH/CPS no later than the date and time for closing.

Failure to acknowledge receipt of Amendment Three (3) for Solicitation Number **RM-13-HCA-ICRF-000-BY4-SC** may be cause for rejection of any proposal submitted in response to the subject HCA.

Signed:

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

Amendment Number Three (3) is hereby acknowledged and is considered a part of the proposal for Solicitation Number **RM-13-HCA-ICRF-000-BY4-SC**.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title of Authorized Representative

\_\_\_\_\_  
Print or Type Name of Offeror