

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NO. VA259-14-AP-2790	PAGE 1 OF 45	
2. CONTRACT NO.	3. AWARD/EFFECTIVE DATE	4. ORDER NO.	5. SOLICITATION NUMBER VA259-15-R-0232	6. SOLICITATION ISSUE DATE 02-20-2015		
7. FOR SOLICITATION INFORMATION CALL:	a. NAME Aldo Fred Girany	b. TELEPHONE NO. (No Collect Calls) 307 433-3761	8. OFFER DUE DATE/LOCAL TIME 03-16-2015			
9. ISSUED BY Department of Veterans Affairs Network Contracting Office NCO 19 4100 E. Mississippi Avenue, Suite 900 Glendale CO 80246		CODE 00259	10. THIS ACQUISITION IS <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: 100 % FOR: <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM NAICS: 621498 <input type="checkbox"/> EDWOSB SIZE STANDARD: \$20.5 million <input type="checkbox"/> 8(A)			
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE	12. DISCOUNT TERMS		<input type="checkbox"/> 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)	13b. RATING N/A		
14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input checked="" type="checkbox"/> RFP			15. DELIVER TO Department of Veterans Affairs VA Eastern Colorado Health Care System 1055 Clermont Street Denver CO 80220-3808			
16. ADMINISTERED BY Department of Veterans Affairs Network Contracting Office NCO 19 4100 E. Mississippi Avenue, Suite 900 Glendale CO 80246			CODE 00259			
17a. CONTRACTOR/OFFEROR CODE	FACILITY CODE	18a. PAYMENT WILL BE MADE BY Department of Veterans Affairs Financial Service Center Electronically thru Tungsten Austin TX 78714-9971				
TELEPHONE NO.	DUNS:	DUNS+4:	PHONE:	FAX:		
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER			<input checked="" type="checkbox"/> 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input checked="" type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.	20. SCHEDULE OF SUPPLIES/SERVICES		21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Contractor to provide individual beneficiary service requirements, including the beneficiary's Continuous Positive Airway Pressure Machine (CPAP)/ Bi-level Positive Airway Pressure Machine (CPAP)/ Bi-level Positive Airway benefit of equipment, an overview of safety and electrical requirements, infection control procedures, equipment troubleshooting, and information on how to obtain location of the beneficiary location which maybe their home, nursing home or other location in the state of Colorado. See Performance Work Statement for detailed description of the requirement. (Use Reverse and/or Attach Additional Sheets as Necessary)					
25. ACCOUNTING AND APPROPRIATION DATA 554-3640160-201-820100-2560 010020190				26. TOTAL AWARD AMOUNT (For Govt. Use Only)		
<input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA			<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.			
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA			<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.			
<input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED			<input type="checkbox"/> 29. AWARD OF CONTRACT: REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR			31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		30c. DATE SIGNED	31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT)		31c. DATE SIGNED	

(6) 52.204-14, Service Contract Reporting Requirements (JAN 2014) (Pub. L. 111-117, section 743 of Div. C).

(7) 52.204-15, Service Contract Reporting Requirements for Indefinite-Delivery Contracts (JAN 2014) (Pub. L. 111-117, section 743 of Div. C).

(8) 52.209-6, Protecting the Government's Interest When Subcontracting with Contractors Debarred, Suspended, or Proposed for Debarment. (Aug 2013) (31 U.S.C. 6101 note).

(9) 52.209-9, Updates of Publicly Available Information Regarding Responsibility Matters (Jul 2013) (41 U.S.C. 2313).

(10) [Reserved]

(11)(i) 52.219-3, Notice of HUBZone Set-Aside or Sole-Source Award (NOV 2011) (15 U.S.C. 657a).

(ii) Alternate I (NOV 2011) of 52.219-3.

(12)(i) 52.219-4, Notice of Price Evaluation Preference for HUBZone Small Business Concerns (OCT 2014) (if the offeror elects to waive the preference, it shall so indicate in its offer) (15 U.S.C. 657a).

(ii) Alternate I (JAN 2011) of 52.219-4.

(13) [Reserved]

(14)(i) 52.219-6, Notice of Total Small Business Set-Aside (NOV 2011) (15 U.S.C. 644).

(ii) Alternate I (NOV 2011).

(iii) Alternate II (NOV 2011).

(15)(i) 52.219-7, Notice of Partial Small Business Set-Aside (June 2003) (15 U.S.C. 644).

(ii) Alternate I (Oct 1995) of 52.219-7.

(iii) Alternate II (Mar 2004) of 52.219-7.

(16) 52.219-8, Utilization of Small Business Concerns (OCT 2014) (15 U.S.C. 637(d)(2) and (3)).

(17)(i) 52.219-9, Small Business Subcontracting Plan (OCT 2014) (15 U.S.C. 637(d)(4)).

(ii) Alternate I (Oct 2001) of 52.219-9.

(iii) Alternate II (Oct 2001) of 52.219-9.

(iv) Alternate III (OCT 2014) of 52.219-9.

(18) 52.219-13, Notice of Set-Aside of Orders (NOV 2011) (15 U.S.C. 644(r)).

(19) 52.219-14, Limitations on Subcontracting (NOV 2011) (15 U.S.C. 637(a)(14)).

(20) 52.219-16, Liquidated Damages—Subcontracting Plan (Jan 1999) (15 U.S.C. 637(d)(4)(F)(i)).

comply with all Joint Commission competency requirements. Documentation shall be made available upon written request of the contracting officer or Pulmonary Department or designee.

The Contractor shall educate, evaluate, and document employee education in strict accordance with current Joint Commission standards. Only employees who have been properly trained and who have demonstrated competency may perform equipment deliveries, recoveries and patient education.

All CPAP/BiPAP set-ups, follow-ups, mask fits, troubleshooting of equipment and education on equipment shall be performed by a State of Colorado licensed Respiratory Therapist.

The Contractor shall be staffed and have sufficient supplies to render satisfactory customer service at all times to the beneficiary. The Contractor shall be responsible for acts and omissions of his/her employees, his/her Sub-contractors or satellite offices and their employees. Sub-contractors are required to adhere to the requirements of this contract

J. The Pulmonary Department will be responsible for certifying the invoices stating that the appropriate services have been rendered.

K. The COR shall be responsible for verifying contract compliance. After contract award, any incidents of contractor noncompliance as evidenced by monitoring procedures shall be forwarded immediately to the Contracting Officer. The COR shall provide the contracting officer with an annual evaluation based on contractor performance prior to exercising any option year.

L. Reimbursable expenses:

Current Healthcare Common Procedure Coding System (HCPCS Codes) noted in the contract Price/Cost Schedule are the only services authorized and paid for other than mileage as indicated below.

Mileage will be paid in the following manner. Any location outside a radius of the following cities will be reimbursed at the Colorado Medicaid rate A0090 which is currently \$0.36 per mile.

- Pueblo- Pueblo Vet Center 1515 Fortino Blvd., Suite 130 Pueblo, CO 81008. Radius 25 Mile
- Colorado Springs- Colorado Springs Vet Center 602 South Nevada Avenue Colorado Springs, CO 80903- Radius 25 Miles
- Denver- VA Eastern Colorado Health Care System 1055 Clermont Street Denver, CO 80220- Radius 30 Miles
- Fort Collins- Fort Collins Outpatient Clinic 2509 Research Blvd. Fort Collins, CO 80526-8108 Radius 25 miles.
- Grand Junction- Grand Junction VA Medical Center 2121 North Avenue Grand Junction, CO 81501. Radius 35 miles.
- Alamosa- Alamosa /San Luis Valley Clinic/Sierra Blanca Med. Ctr 622 Del Sol Drive Alamosa, CO 81101 Radius 25 Miles.
- Craig- Craig CBOC 551 Tucker Street Craig, CO 81625 Radius 25 Miles.
- Montrose- Montrose Outpatient Clinic 4 Hillcrest Plaza Way Montrose, CO 81401 Radius 25 Miles.
- Durango- Durango CCBOC 1970 East Third Avenue, Suite 102 Durango, CO 81301 Radius 25 Miles.

B.3 ORDERING INSTRUCTIONS

One Blanket Purchase Agreement (BPA) or one Indefinite Delivery Indefinite Quantity (IDIQ) Contract will be awarded. Any warranted Contracting Officer in NCO 19 may place orders up to the limit of their Warrant.