

VA248-17-Q-0371 PR Home Oxygen

Vendor questions are answered below.

No.	Question	Answer
1	<p>I will like to inquire about the relation between the Performance Work Statement (PWS) and the Price Schedule. Specifically, there are numerous requirements related to the National Patient Safety Goals and related assessments to be performed that do not relate to any items in the Price Schedule. Items 0001 thru 0018 are item specific supplies deliveries, items 0019 thru 0027 are Preventive Maintenance Svs for different equipment, items 0028 thru 0033 are for different equipment relocation or pick-ups, and items 0034 thru 0036 is for equipment calibration (in the current contract this was for PAP equipment prescription changes or PAP machines that were mailed to the patient residence by VA and needed to be calibrated according to the prescription).</p>	<p>Additional Items 37 to 48 were included to the Price Schedule. Revised Price schedule attached.</p> <p>The new contract will not include PAP equipment.</p>
2	<p>In which of these services should we include quotation for GFE equipment (all equipment in the current contract is GFE) initial setup, patient caregiver education, home assessment, risk assessment, medication recompilation and Pulse Oximetry?</p>	<p>Services included on Item 0034-0036.</p>
3	<p>In section B.1 item 4 (page 4 of 49) it states that "Payment will be per individual placed orders and will be paid via Government Purchase Card". In the current contract payment is made for the grand total for all invoices during a given month, as per section 22.2 of the PWS. Please clarify?</p>	<p>For items from 0001 to 0027 are submitted to Prosthetics Service on a monthly basis:</p> <ol style="list-style-type: none"> <li>a. Individual invoices per patient</li> <li>b. Data entry done (each individual invoice per patient) in the Home Oxygen Main Menu</li> <li>c. Once data entry is completed, an e-mail is sent to the Contractor to verify accuracy</li> <li>d. Once verified by the Contractor, they must submit a final invoice for our records and submit to OB10 for payment to be processed with established 1358</li> <li>e. OB10 Acceptance Notice is received and certification is done by someone other than the one who did the data entry</li> </ol>
4	<p>In section E.10 Evaluation Factors, Technical Factor Three: Staff Qualifications a. (page 28 of 49) states to "Provide certification for the licensed, certified or registered RT staff as per</p>	<p>If the contractor offers respiratory therapist (RT) staff in their proposal, the contractor must provide the credentials/certification for that RT.</p>

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	PWS section Contractor Requirements. The only mention in the PWS pertaining this is in section 13.5 where it states that this list is to be provided to the COR no more than five days after contract award. Please clarify?	
5	There are numerous requirements in the PWS related to the National Patient Safety Goals and related assessments to be performed that do not relate to any items in the Price Schedule. Items 0001 thru 0018 are item specific supplies deliveries, items 0019 thru 0027 are Preventive Maintenance Svs for different equipment, items 0028 thru 0033 are for different equipment relocation or pick-ups, and items 0034 thru 0036 is for equipment calibration. In which of these services should we include quotation for equipment initial setup, patient caregiver education, home assessment, risk assessment, medication recompilation and Pulse Oximetry?	Service included on Line Items 0034 to 0036.
6	Section 10.9 asks to provide a firm-fixed pricing for the equipment, supplies and services per patient per month. Is this related to the previous question and how? Where in the Price Schedule are we to submit this quotation PPPM (per patient per month)? This section states that follow up safety reviews shall be performed 2 times monthly on mechanical ventilation patients and every 90 days on oxygen and noninvasive ventilation patients. Current Puerto Rico VA protocol and contract has oxygen patients on monthly visits. On the PWS it states in sections 6.1, 7.9, 7.10, 8.1, 8.4, 9.1,14.1 that it is expected to perform this services on a monthly basis. Please clarify?	The PWS was modified to read: "Per scheduled visit" instead. The safety review was changed from 60 to 90 days on oxygen and noninvasive ventilation.
7	In section 2.0 of the PWS it switches between GFE and contractor rented equipment. In the event that the Government decides or needs to rent a piece of equipment (i.e. concentrators, regulators, conserving devices, ventilators, air compressors, PAP's, back up batteries, power supplies) because of the non-availability of GFE, where in the price schedule is it to be quoted for such equipment rental?	The PAP is not included on this contract.
8	In section 2.0 of the PWS it states that veterans with a prescription for a mechanical ventilator shall be provided with an appropriate backup system including a complete second ventilator system. Since the ventilator is government	A mechanical ventilator patient is issued two ventilators, one main and the other backup. When Preventive Maintenance is to be given, a new set is issued from GFE.

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	furnished equipment (GFE) it is understood that the backup ventilator would be GFE as well. The same applies to all switch-outs under this section. Please clarify?	
9	In section 6.1 it identifies that an emergency service includes the immediate repair service on a call basis for inoperable equipment or equipment malfunction which jeopardizes the patients' health. Services include all repairs required to bring the equipment to an optional operational status. Under which Price Schedule Line Item are repairs hors and parts to be quoted and once the contract is adjudicated billed? Where in the PWS is the repair work flow established?	The proposed contractor will be responsible for the Preventive Maintenance. In the event of malfunction the contractor is responsible to contact the COR for replenishment and return the damage equipment to the VA Facility for Evaluation or repair.
10	In section 7.3.1, what criteria (clinical and non-clinical) are to be used to identify patients in need of emergency medical assistance?	The criteria are under section 6.1 of the PWS.
11	In section 7.8, ventilator preventive maintenance services, please clarify services to be provided and to be quoted? Under the current contract with VA it is the contractor responsibility to keep track of the ventilators PM schedule (according to manufacturer), when schedule became due the ventilator was picked up at patient home (switch-out) disinfected, packaged and shipped to manufacturer for PM. VA had a separate contract for PM with manufacturer for PM as part of their equipment purchased agreements. Therefore, the line item and description was Preventive Maintenance Service for Ventilator Machines? Is this the same scope of work to be followed under the current RFQ? If not, are PM parts kits to be billed separately since they vary widely in price according to the number of hour kit to be used?	No, all preventive maintenance are included on line items 0019-0027.
12	Please clarify section 8.1, 8.3, 8.4 in lieu of what is stated in section 10.9?	We understand they are the same – 8.1, 8.3 8.4 are more specific as to what is being requested.
13	Under what line item in the Price Schedule is the PWS section 9.1 to be quoted and billed?	Please see revised price schedule items 0034-0036.
14	In section 10.3 it states that all patients receiving home oxygen via oxygen cylinder must be issued an oxygen conserving device. Is this going to be GFE or is there going to be a price schedule for its rental from the contractor's inventory? Or is it to be included in the cost of	Price Schedule Items 0001 to 0003 modified to read:  Refill Oxygen Cylinder/Size H including Wrench, Base and Regulator/Conserving Device

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	the refill cylinders?	Refill Oxygen Cylinder/Size E including Wrench, Base and Regulator/Conserving Device Refill Oxygen Cylinder/Size B (M6) including Wrench, Base and Regulator/Conserving Device
15	In sections 10.7 and 10.9 it talks about GFE deemed beyond repair. Where in the Price Schedule should we quote for this equipment storage and eventual return to VA warehouse for disposal according to COR or VA inventory manager instructions?	Line item is not required for these functions since the contractor will not be storing GPF equipment. In the event that equipment needs to be returned to VA Facility due to damage or other, the contractor shall notify the COR or designee for disposition.
16	Please indicate where to quote for section 10.9 Per Patient Per Month services?	The PWS was modified to read: "Per scheduled visit" instead.
17	Please clarify how section 10.11 relates to Price Schedule?	Services included on Line Items 0034 to 0036
18	In section 12.1, in the event of a corporation or business concern, the experience required is for the organization as such or for the individual representing the organization?	The PWS refer to the Contractor experience working on this type of services.
19	In relation to section 12.4, what percentage of services can be sub-contracted to other providers? Could those sub-contracted providers be in violation of small business requirement because of their business size?	Contractor must have the facilities and resources to setup and perform in the areas of responsibility as specified in the PWS. Contractor must have satisfactory past performance with relevant and recent experience. Any subcontracting/subcontractors must be approved prior to performance under the contract.
20	In section 12.8 and 22.2 it states that invoices must be submitted no later than 10 days after a month's ends. It our current experience with VA COR that 20 days were needed to gather all information as per 22.4. Could the sections be amended to 20 days?	The VA prefers 10 day submission of invoices.
21	Section 13.1, could it read all Contractors employees related to VA contract?	Yes, see revised PWS.
22	In section 16.1 please clarify which line items on the Price Schedule are to be prorated?	Services included on Line Items 0031 to 0033.
23	Having been the contractor for the current VA Home Oxygen Contract I have noticed some variances on the average actual usage and in the Price Schedule estimated Quantities. For example, average H cylinders per year have been 550 (please take note that the area has not been affected by hurricanes, and in the event of	No, These are estimated quantities. They were obtained utilizing historical data as well as the current prescriptions for Home O2 and Mechanical Ventilator patients. Extraordinary situations such as hurricanes and other acts of nature must be taken into consideration.

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	<p>one occurring will require a higher usage of H cylinders), average E cylinders per year have been 13,826 and average B cylinders per year have been 2,727. Average PM for concentrators performed in PR has been 860 per year, humidifiers and 7' cannulas have been around 7,000 each. The rest of the line in the Price Schedule items is fairly close. Would the Estimated Quantities affect actual contract invoice payments?</p>	<p>Payments will not be affected since it will always depend on the equipment (tanks, supplies, etc.) provided to our patients according to the prescription on a monthly basis. In the event of a need to provide additional tanks, supplies, etc., the Contractor will always need to request authorization providing proper justification.</p>
24	<p>Please discuss Transition period if there is a new awardee and existing contractor "Medic is the existing contractor" and what it entails, timeline to complete transition of replacement equipment at patient's home?</p>	<p>Transition period is up to 90 days.</p>
26	<p>Please confirm if the Center memorandum applies to this contract? PWS has verbage "The Contractor will participate in the Home Oxygen Care Committee/Home Respiratory Care Team (HRCT), if requested by the Committee Chairman, thru the COR." Please see the Home Oxygen Center Memorandum No. 111-08-05 dated July 2008. Please ask if this applies also Service Memorandum: Mechanical Ventilation Preventive Maintenance (PM) Record?</p>	<p>Attached Center Memos. Please note that Center Memorandums are subject to change upon Facility's requirement. See memorandums attached separately.</p>
27	<p>Please confirm if VHA Directive 2006-021 Reducing the Fire Hazard of Smoking when Oxygen Treatment is expected applies?</p>	<p>Yes it apply, see attachment.</p>
28	<p>Please confirm if 1) Mechanical Ventilation Safety and Clinical Alarms Assessment and Instruction Form and (2) Home Oxygen Program Safety Assessment and Instruction Form (Identified patient smoking while O2 in use)</p>	<p>Yes it apply, see attachments.</p>