

This is a Request for Information (RFI) announcement only. This is not a solicitation. The purpose of this RFI is to gain knowledge of current market conditions relative to NAICS 621111, Offices of Physicians (except Mental Health Specialists) with a size standard of \$11 Million. The Department of Veterans Affairs (VA), Network Contracting Office 23 on behalf of the Sioux Falls VA Health Care System, Sioux Falls, South Dakota, is seeking to identify any Small Business vendors capable of providing 0.7 FTE Pathology services. The anticipated contract will be a firm-fixed price contract for a one year base, plus four one-year options.

Scope: The Sioux Falls VA Healthcare System requires contractual Pathology services to provide services to eligible beneficiaries. Please reference the example schedule of services listed on pages 2-4 for the exact requirement of this contract.

Respondents are not limited to SDVOSB and/or VOSB vendors, all sources are encouraged to apply. The VA is seeking to identify all potential sources. Responses to this Sources Sought must include the following information:

1. Company Name, Address, Contact Person Name, Phone Number, Fax Number, email address(es), DUNS number and company website.
2. Socio-Economic Status of business (example: SDVOSB, VOSB, etc.)
3. What medical services does your company primarily provide?
4. Are you, or have you previously provided Medical Officer of the Day PA, NP, MD or DO services to any federal treatment facility? If so, please provide contract number(s) for the previous three (3) years.
5. Will your company enter into a joint venture or other relationship in order to provide this service?

Responses to this RFI market survey must be in writing and emailed to charles.morin@va.gov. No telephone responses will be accepted, however you may call Charles Morin at 612-344-2149 with questions regarding this RFI. Responses must be received no later than 3:00 pm Central, May 31, 2017. No solicitation document is available at this time. This RFI is to acquire information only. Vendors interested in providing an offer will have the opportunity to respond to a Request for Proposal that shall be published separately at a later date.

Schedule of Services**BASE YEAR: 12/1/2017 to 11/30/2018****(Dates and CLINs are an example of what will likely be on the solicitation)**

CLIN	SUB-CLIN	Description	QTY	Unit	Unit Cost	Total Annual Cost
0001	None	<p>0.7 FTE PATHOLOGY PHYSICIAN SERVICE</p> <p>Board Certified/Board Eligible</p> <p>On-Site, Monday through Friday, 7:30 AM to 11:00 AM; 11:00 AM to 12:00 PM for Noon Conference Call, On-Call from 11:00 AM to 4:00 PM</p> <p>NOTE: Noon Conference consists of teaching residents and occasional sub-specialty efforts for VA patients on an as needed basis.</p>	1440	Hours	Do not price	Do not price
		KEY PERSONNEL				
	0001a	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
	0001b	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
	0001c	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____

	0001d	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
	0001e	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
	0001f	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
	0001g	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
	0001h	NAME: _____ TITLE: _____		Hours	\$_____/hr	\$_____
0002		On-Call, Pathologist Service 20 Hours per year	20	Hours	\$_____/hr	\$_____
0003		Call Back, Pathologist Service 10 Hours per year	10	Hours	\$_____/hr	\$_____
0004		HCPCS Code 88321, Microslide Consultation	150	Each	\$_____/ea	\$_____

0005		HCPCS Code 88142, Cytopath c/v Thin Layer	300	Each	\$_____/ea	\$_____
0006		HCPCS Code 87624, HPV High-Risk Types	200	Each	\$_____/ea	\$_____
0007		HCPCS Code 88108-TC, Cytopath Concentrate Tech	325	Each	\$_____/ea	\$_____
0008		HCPCS Code 88305-TC, Tissue Exam by Pathologist	50	Each	\$_____/ea	\$_____
0009		HCPCS Code 88172-TC, Cytp DX Eval FNA 1st EA Site	75	Each	\$_____/ea	\$_____
0010		HCPCS Code 88365-TC, Insitu Hybridization (Fish)	45	Each	\$_____/ea	\$_____
0011		HCPCS Code 88323, Microslide Consultation	10	Each	\$_____/ea	\$_____
0012		HCPCS Code 88312-TC, Special Stains Group 1	10	Each	\$_____/ea	\$_____
0013		HCPCS Code 88365, Insitu Hybridization (Fish)	10	Each	\$_____/ea	\$_____
0014		HCPCS Code 88342-TC, Immunohisto Antb 1st Stain	175	Each	\$_____/ea	\$_____
0015		HCPCS Code 88360, Tumor Immunohistochem/manual	10	Each	\$_____/ea	\$_____
TOTAL COST FOR BASE YEAR:					\$_____	