

COST AND PRICING DOCUMENTATION TO BE SUBMITTED BY SOLE-SOURCE CONTRACTOR (PRELIMINARY REVIEW MATERIALS NEEDED FOR FULL-TIME EQUIVALENT (FTE)-BASED REQUIREMENTS)

1. Physician employment agreements for all physicians who will be providing services under the contract. These agreements need to specify what portion of their respective salaries the University pays and what portion the practice group pays, if applicable.
2. If any portion of any of the salaries paid to physicians identified in preceding paragraph 1, is funded by grants, provide the details of those grants to include the amount of the grant and the percentage of the physician's time dedicated to fulfilling the grant obligation. If there is no grant funding, provide a statement to that effect. If any portion of an individual salary is paid for by sources other than grants, the practice group, or the university, please provide the amount and the source of the funding.
3. Detailed support for fringe benefit expenses. This support needs to include what is included in the amount along with supporting documentation for the expense. Fringe Benefits need to be broken down by organizational entity, e.g., University or Practice Group.
4. Detailed support for any overhead expenses. This support needs to include what is included in the amount, along with supporting documentation for the expense. Include adequate documentation detailing the method of allocating expenses to the department and/or physician. These expenses need to be broken down by organizational entity, e.g., University or Practice Group.
5. Supporting documentation for the professional liability insurance expense by physician.
6. Supporting documentation for any other direct physician expense. The support needs to detail what makes up the expense and policies governing the amount allowed for physicians.
7. Policies and procedures governing any incentive payments made to the physicians referred to in paragraph 1.
8. Policies and procedures governing amounts paid to physicians for on-call, call-back, and weekend or holiday hours.
9. Policies and procedures governing timekeeping procedures for physicians rendering professional services for the University, and the practice group, if applicable.
10. Provide the number of hours worked weekly by each of the physicians identified in paragraph 1. Do not limit the response to the number of hours expended or expected to be spent at VA; provide the total number of hours worked weekly by the physicians,

including time spent in research, clinical, administrative, and other duties for the university and practice group.

11. Provide the expected percentage of total effort for each proposed physician that will be provided fulfilling the duties and responsibilities specified in the statement of work. Additionally, provide the percentage of total effort that each proposed physician will be expected to spend fulfilling non-VA obligations. This can be expressed as a percentage of the physician's total annual effort.

NOTE: *The response to numbers 10 and 11 may be provided in table format as an example:*

<i>Physician Name</i>	<i>Average Weekly Hours</i>	<i>Percent of Effort at VA</i>	<i>Percent of Effort at University</i>
<i>Dr. Smith</i>	<i>60</i>	<i>50 percent</i>	<i>50 percent</i>