

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

BPA NO.

1. CONTRACT ID CODE

PAGE
1OF PAGES
82. AMENDMENT/MODIFICATION NUMBER
00013. EFFECTIVE DATE
08-31-2018

4. REQUISITION/PURCHASE REQ. NUMBER

5. PROJECT NUMBER (if applicable)
None

6. ISSUED BY CODE

36C263

7. ADMINISTERED BY (If other than Item 6)

CODE

Department of Veterans Affairs
Network Contract Office 23
316 North Robert Street, #529
St. Paul MN 55101-1495Department of Veterans Affairs
Network Contract Office 23
316 North Robert Street, #529
St. Paul MN 55101-1495

8. NAME AND ADDRESS OF CONTRACTOR (Number, street, county, State and ZIP Code)

To all Offerors/Bidders

(X)

9A. AMENDMENT OF SOLICITATION NUMBER

36C26318R0478

X

9B. DATED (SEE ITEM 11)
08-15-2018

10A. MODIFICATION OF CONTRACT/ORDER NUMBER

10B. DATED (SEE ITEM 13)

CODE

FACILITY CODE

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers is extended, is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:(a) By completing Items 8 and 15, and returning 1 copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or electronic communication which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or electronic communication, provided each letter or electronic communication makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE

A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.

B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).

C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:

D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor is not, is required to sign this document and return ONE copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

Off Site Teleradiology Service for VA NWHCS

Period of Performance 01 January 2019 - 31 December 2023
(estimated start date)

See following pages for changes to Solicitation 36C263-18-R-0478.

This is a 100% set-aside for Veteran-Owned Small Business.

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

Kyle Bauman
Contracting Officer

15B. CONTRACTOR/OFFEROR

15C. DATE SIGNED

16B. UNITED STATES OF AMERICA

16C. DATE SIGNED

(Signature of person authorized to sign)

BY _____
(Signature of Contracting Officer)

Solicitation VA263-18-R-0478 has been amended as follows.

- Block 8 (OFFER DUE DATE/LOCAL TIME) of the front page Standard Form 1449 shall be replaced with the following:

09-17-2018/1200

- Paragraph 3.3 of the Performance Work Statement (PWS) shall be replaced with the following:

3.3.3. The contractor shall maintain open and professional communication with members of the VA Facility Diagnostic Imaging staff. The contractor shall provide up-to-date points of contact to facilitate communication on clinical, technical and administrative issues. Clinical staff will be available by phone and pager 24/7. The Contractor will provide a schedule of radiologists with telephone numbers for consultation by VA technologists and referring physicians. The contractor will provide a FAX number for the VAMC transmission of prior radiographic reports.

- Paragraph 4.4.4.3 of the PWS shall be replaced with the following:

4.4.4.3. Each VAMC will provide necessary procedures for reports to be reviewed, edited (if required), and for electronic signature approval by the Contractor. Contractor will provide interpretation per routine exam to the respective VAMC within 24 hours after receipt of images. Contractor will not be held responsible for late reports caused by delays in the respective transcription service system. All exam study interpretation reports shall be dictated into the designated VAMC system and verified in the VISN Vista dictation system. Non-routine and emergency exams will be handled on a case-by-case basis, but all emergency exams will take precedence over all routine exams.

- Paragraphs 4.4.7 through 4.4.9 of the PWS shall be replaced with the following:

4.4.7. Communication: Questions from VA Staff regarding final reports or preliminary reports to reading radiologist will occur via telephone.

4.4.8. Direct Patient Care: estimated 97% of the time involved in direct patient care.

4.4.8.1. Scope of Care: Contract physician(s) shall be responsible for providing: including, but not limited to:

4.4.8.1.1. Contractor shall provide board certified Radiologists to perform final teleradiology Interpretation services. Examination images captured by VA NWIHCS will be transmitted to the contractor using the DICOM

protocol and the Federal Information Processing Standard (FIPS) compliant encryption. Upon receipt of captured image and patient information from VA NWICHHS, the contractor shall provide an interpretation for studies. After the images are sent using the PACS electronic system, VA personnel will inform the contractor that images are ready for viewing. These procedures will be rendered in writing once the contract is awarded.

4.4.8.1.2. The contractor will provide comprehensive coverage in reading x-rays, specifically in the high skill areas such as ultrasound, computerized tomography (CT) and magnetic resonance imaging (MRI), Musculoskeletal Radiology (MSK), PET/CT, and general diagnostics.

4.4.8.1.3. The contractor will dictate their findings in a timely manner after the x-ray is received so that the average turn-around time for ROUTINE dictated and signed reports does not exceed forty-four (48) hours. The contractor will provide preliminary STAT/EMERGENT reports within one (1) hour of image receipt and final dictated and signed STAT/EMERGENT reports within twenty-four (24) hours of initial receipt. Dictated reports will be uploaded via HL7 message in an acceptable format that is compatible with the VA NWIHCS Radiology package. Contractor will be in compliance with VA Handbook 6500.6, Appendices B & C.

4.4.8.1.4. No transcription services will be provided. Report quality/content will follow ACR standards of report structure and communication of results. Contract Radiologist(s) will notify clinicians of critical findings in accordance with American College of Radiology (ACR) standards, VHA and the VISN "alert notification" policies and in a manner appropriate to the clinical urgency of the case. When required by policy, contract Radiologists will supplement critical finding reporting methods by use of the guidance as outlined in VA NWIHCS Policy RAD-129 (Attachment B). The VAMCs will provide necessary procedures for reports to be reviewed, edited (if required), and electronic signature approval by the contractor.

4.4.8.1.5. If a serious medical condition is identified during the interpretation; the report shall be immediately called in telephonically or faxed to the attention of VA NWIHCS medical facility's designated POC for their information and action.

4.4.8.1.6. All STAT exams, when properly identified, will be communicated within one (1) hour of receipt of images and appropriate paperwork. STAT exams shall be identified by a telephone call to contractor or by a stamp or other indication on the paperwork provided by contractor. All STAT exams must be identified at or prior to receipt of the images and paperwork by contractor. For STAT exams, a preliminary reading will be provided by a radiologist or experienced radiology resident within 1 hour of the image being transmitted to the reading site. The level of experience of the preliminary reader must be, at a minimum, the same level the Contractor provides for its own

patients. A preliminary reading will be transmitted back to the referral site within 1 hour of the image being transmitted to the reading site. This can occur by fax, email, or by direct entry into the VA electronic medical record. (Note: "Preliminary" is defined as abbreviated results. The actual substance of the interpretation is NOT to change in any significant way from "preliminary" to "final" interpretation). All stat exams require the contractor to call the requesting physician within one business day from the time the images were transmitted providing a verbal interpretation. The signed dictated report will be completed within 48 hours of receipt. VA will not need to guarantee any minimum image volume.

4.4.8.1.7. Contractor to have a process in place to assure preliminary reads, after hours and weekends, are called to the physician and physician contact will be noted in the radiology report.

4.4.8.1.8. Final interpretation and official signature will be transmitted electronically via HL7, electronically signed by an attending radiologist within 24 hours of the image being transmitted to the reading site.

4.4.8.1.9. Availability to consult with a radiologist to determine the most appropriate study for the clinical scenario involved; although for the most part, pre-defined protocols would be used. Fees may be charged for such consults if the consult does not result in an imaging study being performed.

4.4.8.1.10. All Diagnostic Radiology services shall be provided by the contractor's credentialed radiologists.

4.4.9. Professional standards for documenting care:

4.4.9.1. Radiologic Interpretations will be transmitted electronically by HL7 messaging and be signed, by the originator, immediately following the procedure (not more than 24 hours post-exam or before the patient moves to the next level of care). All reports must be coded 100%. Critical results must be called to the ordering physician immediately and documented in final report.

4.4.9.2. The Radiologic Interpretations will be electronically signed, by the contractor, through HL7 messaging that identifies the interpreter's name and a signature block verifying origin of report. All reports must be coded 100% in accordance to VA standard and in the event of an emergent/STAT medical finding, the interpreters will call the ordering service with the results and provide consultation as needed.

• Paragraph 6.4 of the PWS shall be replaced with the following:

- 6.4. The contractor will set up network connectivity on their end in order to accept network area translated internet protocol address, application entity title and port, and provide the teleradiology equipment such as diagnostic work stations, firewalls, switches, routers, clients, and servers required at the contractor site. The VAMC will set up network connections from VA equipment and interfaces. Communication between contractor technical representatives, VAMC network engineers, and VA PACS personnel will be required to establish all connectivity.

Additionally, the following questions and answers are provided:

Solicitation Reference	Question/Comment	Answer/Reply
Attachment A	<p>Can the pricing be grouped by imaging modality and type of exam? Examples:</p> <ul style="list-style-type: none"> a. MRI: flat rate price for all types of exams by CPT code. b. MRA: prices for exams by types. c. CT: single price with exception of CT abdomen and pelvis. d. CTA: priced by type of exam. e. US: flat rate for cardiac exams; flat rate for OB exams; flat rate for others. f. X-ray: flat rate price for all types of exams by CPT code. g. Molecular Imaging (nuclear medicine); single price with exception of PET imaging. h. PET i. A single price for all types of exams by CPT codes 	<p>Yes. Alternate price schedules, including grouping by imaging modality and type of exam, are acceptable as long all the CPT codes in the schedule (attachment A) are covered.</p>
PWS 1.1 (p.5)	What is the estimated coverage needs after 2200h CST Monday through Sunday?	<p>The average estimated need is 120 to 140 readings per week after 2200 CST.</p>
PWS 2.1.9 (p.9)	Since radiologists will not access VA systems is cyber security training required?	<p>There is no requirement for cyber security training in the solicitation. Although radiologists may not be accessing VA systems, they will have access to VA information (patient data), so the requirements of PWS ¶2.1.9 are required.</p>

<p>General Connectivity</p>	<p>VISN PACS</p> <p>i. Is a common interface to be used?</p> <p>ii. How is order requested > images > reporting sequence to be accomplished with VA or contractor system?</p> <p>iii. On what system are images to be read, i.e. VA or contractor's system?</p> <p>iv. What is the name of your PACS provider(s)?</p> <p>v. How are images routed?</p> <p>vi. Archive – VNA (vendor neutral archive): Is it vendor neutral?</p> <p>vii. Is the 90-day retention period (see PWS 4.4.6) of exams to be done on the contractor's server?</p>	<p>i.No. The VA will send to contractor destination.</p> <p>ii. VA system.</p> <p>iii. Contractor system. The Contractor will dictate the studies then send to the VAMC via HL7 message. The VA will archive the studies.</p> <p>iv. VISAGE</p> <p>v. Through an "NATD" IP from the VA PACS to Contractor destination.</p> <p>vi. Yes</p> <p>vii. The 90-DAY retention will be on the contractor's server. There is no need to retain/archive beyond the 90-days unless a law requires.</p>
<p>General Connectivity</p>	<p>i. Will the contractor's PACS be used for image upload and interpretation?</p> <p>ii. Will the VA provide 24/7 support to our IT department of any issues that are directly related to the VA's system?</p>	<p>i. YES, the VA will send the contractor the images via HL7 to be interpreted on the contractor's PACS.</p> <p>ii. Yes</p>
<p>General Connectivity</p>	<p>VISTA (electronic medical records)</p> <p>i. Who is the company provider?</p> <p>ii. Will contractor have access to the VistA system for reporting imaging exams?</p>	<p>i.VA</p> <p>ii.No</p>

	iii. Will contractor be able to view patient records as part of the VA RIS (radiology information system)?	iii.No, not at this time. But prior patient records/reports will be provided.
General Connectivity	Reporting: i.What type of communication interface? ii. Who is the VA company provider	i.HL7 ii.VA is the provider.
General Connectivity	Security i. What are network security requirements for software and hardware? ii. Is an active DINPACS certificate required?	i.The Contractor determines the contractor's software and hardware security requirements that will ensure data is secure and not compromised or corrupted. ii.No
GENERAL	The solicitation states one copy of the proposal is required, but it does not say if the submission is a hard copy and mailed to the contracting office or if the contractor can submit the one copy via email. Please advise.	An e-mail copy of the proposal is sufficient. A hard-copy, mailed proposal is not required.