

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES 1 7	
2. AMENDMENT/MODIFICATION NO. 002		3. EFFECTIVE DATE 01/07/2002	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)	
6. ISSUED BY National Heart, Lung, & Blood Institute, NIH Rockledge II Building, Room 6110 6701 ROCKLEDGE DR MSC 7902 BETHESDA MD 20892-7902			7. ADMINISTERED BY (If other than Item 6)		
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) Recipients of RFP NHLBI-HO-02-10, Systems and Applications Development Program (S/ADP)			(✓)	9A. AMENDMENT OF SOLICITATION NO. RFP NHLBI-HO-02-10	
			(✓)	9B. DATED (SEE ITEM 13) December 26, 2001	
				10A. MODIFICATION OF CONTRACT/ORDER NO.	
				10B. DATED (SEE ITEM 13)	
CODE	FACILITY CODE		11. THIS ITEM 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 ___ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR 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 telegram or letter, provided each telegram or letter 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.

<input checked="" type="checkbox"/>	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.
<input type="checkbox"/>	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).
<input type="checkbox"/>	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
<input type="checkbox"/>	D. OTHER (Specify type of modification and authority)

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

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

Technical and other questions are asked and answered in this amendment no. 002.

In addition, any offerors that have not received the FAQ email (including the previous RFP) or who would like to receive the WordPerfect version of the RFP should send an email request to the Contracting Officer listed on the RFP at rj12s@nih.gov.

A picture of the Contracting Officer's signature has been omitted from Block 16B. of this amendment to reduce the file size.

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) Robert A. Julia Contracting Officer, HLVD Contracts Section	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA BY _____ /s/ _____	16C. DATE SIGNED 12/26/2001
(Signature of person authorized to sign.)		(Signature of Contracting Officer)	

Questions and answers:

1. Who is the contact person for the current contractor?

Answer: The contracting officer is the only contact point for this solicitation or his supervisor or co-workers in his absence..

2. May we contact current employees about continuing to work on the tasks after June 29, 2002, assuming the incumbent is not renewed?

Answer: Yes, offerors may contact any potential sources, subcontractors, or references. If a new contractor wins this competition, the incumbent will no longer be the contractor after expiration of the current (incumbent) contract .

3. How can we contact those employees (above); names, phone numbers?

Answer: The incumbent contractor's name has been provided (Peace Technology, Inc.). Any contacts made by offerors will be at their own initiative and creativity. The Government will not play any role in offeror's recruiting or teaming attempts.

4. May we contact managers within the NHL&B Institute to discuss current applications and current employees?

Answer: The only contact for this solicitation is the Contracting Officer listed on the solicitation or his supervisor or co-workers in his absence.

5. Will NIH be providing the fixed fee value for this contract prior to the due date? (Article B.2.b)

Answer: Offerors shall propose a profit or fixed fee amount, which will be subject to negotiation.

6. Will NIH provide a list of the costs referred to in Article B.4, or should the bidder list possible costs that could be covered by this paragraph?

Answer: Offerors, in their pricing proposals, are advised to consider any cost items restricted by the contract terms, including the special clauses and the applicable cost principles as well as such general clauses affecting costs as the Subcontracting clause and to propose listing such items in this article, so that such costs, if accepted in negotiations, will be allowable costs under the contract terms. Note that offerors should fill out such proposed cost items in the draft contract that is comprised by the solicitation.

7. Will NIH provide a "not to exceed" value for domestic travel cost? (Article B.3.b(a))

Answer: Offerors shall identify, propose, and justify any costs needed for travel in direct performance of the contract. If accepted in negotiations, this amount will be inserted here. Note that offerors should fill out such proposed cost items in the draft contract that is comprised by the solicitation.

8. Prior to the inception of work, a written analyses and plan must be written and approved by the Project Officer, what is the NIH expectation for a new contractor during the first 30 days of the contract award under this provision? (The new contractor will have an orientation and learning curve concern.)

Answer: Costs to analyze and plan are allowable under the proposed contract. This is part of the work required by the contract.

9. Will NIH name the Project Officer before the proposal due date, and will bidders have access to this person?

Answer: The contracting officer is the only contact point for this solicitation. The Project Officer will participate in any negotiations and will be named in any resulting contract.

10. Will NIH provide an Indirect Cost Rate for this contract prior to the due date?

Answer: See Article G.4., Indirect Costs, for instructions on obtaining burden rates acceptable for use on an NIH contract.

11. Are there any union personnel or job classifications associated with the Institute and this contract for which the bidder will have to consider for wage parity? (Article H.6)

Answer: Article H.6. discusses salary rate limitations mandated by Congress for federal contracts. Such limitations are usually written into the appropriations acts for federal agencies. All contractors must abide by such law. Labor agreements do not affect the applicability of such limitations.

12. Will NIH provide the specific representations and certifications required under Part IV, Section K?

Answer: Section K contains a link to the Representations and Certifications which must be filled out, signed, and submitted with the business proposal. The specific Reprs & Certs will depend on the type of contract proposed.

13. Several applications were written by third parties under contract to NIH (e.g. NTM Consulting, Inc., Altum, Inc.)—do such third parties still have maintenance or development responsibilities for these applications or will the new contractor have full responsibility for the applications?

Answer: Any applications which have been delivered to and accepted by the Government are the property of the Government. Typically, such applications are no longer the responsibility of the contractors which developed them, with the possible exceptions of any warranties or guarantees. If new applications are developed under separate contracts, the Project Officer will discuss the schedule for testing and acceptance with staff of the successful S/ADP contractor prior to assignment of responsibility for maintenance and continued development.

14. Does the Institute have three or more system environments, normally referred to as a “production system,” “development system,” and “test system?”

Answer: A comprehensive list of our systems is included as Attachment 1 to the RFP.

15. Do the existing systems, applications, or process conform to an ISO or CMM standard?

Answer: No.

16. If the answer to [the above] is no—does NIH expect to move to either an ISO or CMM standard in the next five years?

Answer: No.

17. Is documentation available for each operating system and application covered in this RFP—operating procedures and manuals, application manuals, user guides, and training manuals? May bidder review such documentation prior to the proposal due date?

Answer: See item 8 above. The procedures for documenting applications under the proposed contract are a continuation of procedures used under the predecessor contracts. The Project Officer and his staff will be available as necessary to instruct new contractor personnel in our existing systems.

18. What documentation will the bidder have to provide for each of the enhancements noted in this RFP?

Answer: See the technical proposal instructions of the RFP in Section L, beginning on page 31 (as amended), including the web link provided.

19. For the enhancements noted in the RFP, have functional or technical specifications been developed?

Answer: Development of systems and enhancements is an iterative process. Offerors are encouraged to estimate the stage of the enhancements from the specificity of their description. Such specifications are subject to revision as the work progresses.

20. Does NIH expect the bidder to begin the application enhancement process immediately, or within some specific number of days following the start of the contract?

Answer: See question 8 above. Where specific dates are not provided in the RFP, it may be assumed that the development schedule will be negotiated during performance on-site between contractor personnel and the Project Officer.

21. Will the bidder be responsible for the operations of a data center, or will the bidder have to work with an existing data center manager?

Answer: See the description of systems in attachment 1. Each system generates, stores, analyzes, and distributes or publishes large volumes of data for its own particular purposes. For data interactions with IMPAC II and other databases maintained by agencies organizationally separate from or hierarchically above NHLBI, those agencies control the data systems and must be complied with. For systems entirely within NHLBI, the successful contractor will have to work with the individuals for whom the systems were developed.

22. Will network, systems, and application diagrams be made available to the bidder prior to the due date of this RFP?

Answer: There are currently no such plans.

23. The information provided about each application is inconsistent, would NIH consider holding a technical systems and application briefing session for all bidders prior to the due date of this proposal?

Answer: There are currently no plans to conduct a pre-proposal conference.

24. In Section M—Evaluation Factors for Award experience with NIH research grants and contracts represents 15% of the criteria. This places the incumbent at an advantage. Will a new bidders experience in similar size and complex organizations be considered equivalent and count toward the 15%?

Answer: It must be understood by offerors that the National Heart, Lung, and Blood Institute is only one of about 15 Institutes that make up the National Institutes of Health. Our incumbent contractor has an advantage of incumbency that we cannot take away. However, there are many firms with identical experience with other Institutes of NIH and an equal advantage. This criterion accounts for 15 out of a possible 100 points. It is not likely that any offeror will be scored the maximum for any of the criteria. While the technical reviewers have not yet been picked, it is possible that some points will be given for equivalent experience. Offerors which document equivalence are more likely to get some credit.

More Questions:

Overall

25. To procure services will 8a be required to have a GSA schedule, or access to a GWACS and/or commercial pricing be sufficient?

Answer: GSA Schedule not required. Commercial pricing will be sufficient, depending on proposed contract type. See pages 3, 7, 12, 29, and 33 of RFP.

25. Is this a new purchase?

Answer: See question 3 above and FAQ email that has been supplied to all who have asked.

26. If not, who is the incumbent? Are they able to recompet? Is the agency satisfied with their performance? How long has the incumbent been performing? Has the incumbent been rated for performance and is this rating available to us?

Answer: See question 3 above and FAQ email that has been supplied to all who have asked.

27. If this is not a new purchase, what was the contract let for previously? What was last year's budget, how much of that budget was spent? If a new purchase, what budget figure has been allocated? Are funds setaside for this project?

Answer: See question 3 above and FAQ email that has been supplied to all who have asked.

28. Is a preconference meeting planned?

Answer: No.

29. Do we have access to the program managers?

Answer: No.

30. Will past performance be an evaluation factor for assessment?

Answer: Read evaluation factors, Section M, pages 34-35.

31. If past performance is a factor, will it be targeted to NIH performance?

Answer: See above.

32. If bidding among potential offers is close, will you allow for best and finals?

Answer: If negotiations (discussions) are conducted, we will request Final Proposal Revisions (formerly called Best and Final Offers) from all offerors within the competitive range.

33. What type of contract is anticipated?

Answer: See RFP pages 3, 12, and 29. Note that offerors shall propose the contract type that is appropriate based on their proposals.

34. How much time and resources will the customer devote to the project for discussion of requirements and actual implementation?

Answer: Whatever it takes. This process will occur after award; see question 8. above.

35. Has NIH conducted a recent cost analysis to determine both the staff and contractor effort required?

Answer: Yes.

36. What is the level of effort?

Answer: See RFP pages 29-30.

Technical

37. Can you identify the mainframe, microcomputer, client/server, Web and network hardware, operating systems, and software technologies in place?

Answer: See RFP Attachment 1.

38. Some of the support systems appear to be still be under development by the vendor, who will maintains those systems?
Answer: The successful offeror after systems are accepted by the Government.
39. Is the customer using a documentation management standard? Tools?
Answer: NHLBI has its own documentation template.
40. What is the current databases being used by the customer?
Answer: Many. See RFP Attachment 1.
41. The contractor is required to develop a new system (enhanced) to reduce the cost of administration, make the system more users friendly, and easier to use. Has the customer initiated and/or completed a cost benefit analysis to determine what objectives are desired and whether this is a go or no go decision?
Answer: No.
42. Does the customer have any preference to any specific testing tools for application and/or system testing?
Answer: None are identified beyond those mentioned in the RFP. Canny offerors will propose and justify any such tools.
43. Is there any software/application system training that the customer desires?
Answer: Read RFP Attachment 1.
44. Is security addressing OMB-A-130 policy compliance: IT Security and IT risk assessment?
Answer: See Article H.7 on page 10.
45. Is middleware software currently deployed? Silver Stream; Web Methods?
Answer: Meaning is not clear. Read RFP Attachment 1.
46. Is a web portal being anticipated?
Answer: You may visit our Website at <http://www.nhlbi.nih.gov/index.htm>.
47. Is there a documentation management system in place? If so, what type? home grown, proprietary?
Answer: Read RFP Attachment 1.
48. Can some of the work be performed off-site?
Answer: Possibly. Hands-on access by contractor staff on-site is considered the most efficient work location, however.
49. What new technologies are being anticipated?
Answer: Read RFP Attachment 1.
50. What enhancements and/or upgrades are being anticipated?
Answer: Read RFP Attachment 1.
51. We are in the process of applying for 8(a) Certification. Unfortunately the certification process will not be completed by January 28, 2002, the due date for the response to the RFP. Will we be allowed to submit our response while we are wating for the certification to be approved?
Answer: Please check with the Small Business Administration.

52. I understand that the RFP responses for the above mentioned are due Jan 28. However, you also have a due date of Jan 7 for proposal intent response sheets. How critical are you going to be about the latter deadline? Is there any flexibility on that to extend it out .. to say the beginning of next week?

Answer: Please get it in as soon as you can.

53. Section 2 states that IRTP is responsible for “workstations, local area networking and associated automation technology.” Section 3 limits this task to “scientific microcomputer desktop services.” Are there IRTP and/or contractor staff responsible for cable plant, servers, routers, firewalls and other network infrastructure?

Answer: Services not called for in the RFP are provided by other means. “IRTP” is the name of the branch that works with our contractors.

54. A question has been received concerning the number of users, support calls, buildings off the NIH campus, etc. The number of employees (users) and consequently workstations may be estimated using the employee directory of our web page. As this is not a solicitation for user support services, this question is not considered relevant.

55. An extensive list of questions has been received including such items as “When is the cutoff for questions regarding this solicitation?” and several questions concerning staffing levels among the prime and subcontractors. Some of the answers are provided above. Staffing may be estimated based on the previous RFP, which has been provided to all who have inquired. Projected staffing under the new contract is set forth in the RFP. SBA regulations on the maximum percentage of subcontracting under 8(a) are cited in the RFP. Staffing by task area is not provided as this is a very fluid figure depending on immediate needs, progress in development, etc.

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