AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES
2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE I	REQ. NO. 5. PROJECT NO. (If applicable)	
6. ISSUED BY CODE		7. ADMINISTERED BY (If other	than Item 6)	CODE
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State, and ZIP Code)		(x)	9A. AMENDMENT OF SOLICITATION NO.	
			9B. DATED (SEE ITE	EM II) OF CONTRACT/ORDER NO.
			10B. DATED (See Ite	
CODE	FACILITY CODE			
	ITEM ONLY APPLIES TO AI	MENDMENTS OF SOLIC	ITATIONS	
The above numbered solicitation is amended as	set forth in Item 14. The hour an	d date specified for receipt o	f Offers is ex	xtended, is not extended.
Offers must acknowledge receipt of this amendment pr	ior to the hour and date specified	I in the solicitation or as amer	nded, by one of the follo	owing methods:
(a) By completing Items 8 and 15, and returning (c) By separate letter or telegram which includes a re THE PLACE DESIGNATED FOR THE RECEIPT OF of this amendment you desire to change an offer alre solicitation and this amendment, and is received prior to the second se	ference to the solicitation and an OFFERS PRIOR TO THE HOUR ady submitted, such change may	mendment numbers. FAILU R AND DATE SPECIFIED M/y be made by telegram or let	RE OF YOUR ACKNO AY RESULT IN REJEC	WLEDGMENT TO BE RECEIVED AT CTION OF YOUR OFFER. If by virtue
	A APPLIES ONLY TO MODIF			
	IES THE CONTRACT/ORDE			CORRED NO IN ITEM 404
(X) A. THIS CHANGE ORDER IS ISSUED PURSUANT TO	o: (Specity authority) THE CHANGES	S SET FORTH IN ITEM 14 ARE I	MADE IN THE CONTRACT	ORDER NO. IN ITEM 10A.
B. THE ABOVE NUMBERED CONTRACT/ORDER IS I ITEM 14, PURSUANT TO THE AUTHORITY OF FAI	MODIFIED TO REFLECT THE ADMIN R 43.103(b).	IISTRATIVE CHANGES (such as	changes in paying office, a	appropriation date, etc.) SET FORTH IN
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	I to sign this document and return	n copies to the issuir	ng office.	
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized	by UCF section headings, including s	colicitation/contract subject matter	where feasible.)	
Except as provided herein, all terms and conditions of the de	ocument referenced in item 9A or	10A, as heretofore changed,	remains unchanged ar	nd in full force and effect.
15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE O		
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF	FAMERICA	16C. DATE SIGNED
(Signature of person authorized to sign)		(Signature	of Contracting Officer)	

1. This question addresses the required organization of the technical proposal. Item L.9a(4) (p.95) indicates that the technical discussion should address the evaluation criteria listed on the following page. Item 2 in the list on the following page (p.96) is a AManagement Plan.@ In the subsequent detail (p.101) and the listing of the award criteria (p.113), Item 2 is identified as AOrganization/Corporate Experience A (p.101). The language describing the project plan and the quality assurance plan touches on a number of management topics suggesting that the management discussion should be part of those sections, with the second item being the discussion of organizational and corporate experience. Please clarify the intention regarding the AManagement Plan.@

The intention of the management plan is that it includes the project plan, the quality assurance plan, plus a description of how the project will be organized and staffed to meet its objectives.

2. On page 98, the RFP indicates that the project plan is to include a person loading chart showing the number of person-days allocated to each task and subtask for each category of staff for each year of the contract and the total contract. The presentation of a full staff breakout by 40 tasks and subtasks for each of 4 years with a total for each panel will be substantial, particularly in view of the desired page limit for the proposal. Would an alternative such as one in which totals for each panel, but not the individual tasks are broken out by fiscal year, be acceptable

Your proposal is acceptable so long as the panel total includes a breakout of the 4 main tasks - HC, MPC, Data Processing and Management..

3. The table on page 19 gives the expected yields of completed RUs for each round of the household survey for the 2003 panel. The footnote indicates that the response rate includes splits, but the calculation of completes in the tables does not appear to have an adjustment for splits. How should splits be accounted for in estimating workload and costs?

In addition to the cases noted in the response rate tables, assume that the number of new RUs through splits is 7 percent in Round 1, 3 percent in Round 2, 3 percent in Round 3, 3 percent in Round 4, and 2 percent in Round 5. The round specific response rates hold for splits as well.

4. The RFP specifies the sample size for the MPC for 2003 but not for 2004 and 2004. Should we assume that the sample sizes will be the same for 2004 and 2005 as 2003?

Yes

5. The general instructions for the proposal submission indicate (p.93) that the Small Disadvantaged Business Participation Plan should be submitted as one of the four separate components of the proposal. The instructions (p.105) for the Small Disadvantaged Business Participation Plan indicate that it should be submitted as a clearly marked section of the business proposal. Please clarify: is the separate submission of this plan all that is required?

The separate submission of this plan is all that is required.

6. To estimate resources required for database design, development, maintenance and enhancement, may we be provided a copy of the current database schema(s) including tables, columns, relationships, code frames and other elements for the HC CAPI and MPC samples and instruments? This includes the database schema(s) for both case management and response data.

Some of the materials are in the Data Processing Report which has been provided. We will provide the following additional materials in a reading room at AHRQ (room 5E119 at 2101 East Jefferson Street, Rockville, Md). Please contact the Contracting Officer, Darryl Grant, at (301) 594-7189 to schedule an appointment for use of the reading room. The reading room will be available until the closing date of this RFP.

MPC Documents

MPC Trainers Manual (Reference Year 2000)
MPC Trainers Manual B Role Plays (Reference Year 2000)
MPC Interviewer Manual (Reference Year 2000)
Trainers Manual for Pharmacy Component (Reference Year 2000)
Pharmacy Component Interviewer Manual (Reference Year 2000)

Household Component Documents

MEPS video

Trainers Guide - Interviewer Training (February 2002)

Trainer → Handbook B Inter viewer Training (February 2002)

Mock Interviews 1-5

Dyads (Role Plays) 1-5, A, B, and C

Question by Question Specifications **B**Panels 5, 6, 7 (January 2002)

Glossary B Panels 5, 6, and 7 (January 2002)

Procedural and Questionnaire-Related Job Aid Booklet (January 2002)

Interviewer Field Procedures Manual (January 2002)

Field Supervisor Manual (January 2002)

Panel 7 Home Study for new interviewers

Panel 7 Home Study for experienced interviewers

Data Processing Documentation

CAPI source code for the HC instrument

(Panel 4, Round 5 included in Volume 1 and Volume 2)
Basic Cheshire Documentation
Cheshire Manual for Programmers (1 binder)
Listing of all hardware and software used for the project

(included in the front section of the Codebook binder)

A copy of Database Notes for HC and MPC, which includes

Annotated Specifications Binder for Panel 4, Round 5 (1 binder)
HC Codebook for Panel 4, Round 5 (1 binder)
Description of Management Data Flow (in Codebook binder)
1997 MPC Questionnaires and Codebooks (1 binder)
Variable Construction Specifications for Data Delivery
(3 binders)
General coding instructions for medical conditions, procedures, prescription medicines (1 binder)

Sample copies of response rate reports

MEPS-HC Methodology Report

7. To understand the complexity of the existing software, may we be provided a copy of the source code for the CAPI instrument?

As identified in the RFP, paper representations of the instrument are available on the MEPS website. We will make a copy of the source code and Cheshire documentation available in a reading room at AHRQ (see response to question #6 for additional details).

8. The Statement of Work task 4.2.4 states

"The contractor shall obtain and maintain equipment and software to continue CAPI interviewing, editing, and data transmission..."

To provide an accurate estimate and detailed approach for this task (4.2.4) we will need knowledge of the existing IT solution including software, hardware and network. Given this need, may we be provided detailed documentation of the project=s current technical design including hardware, network, requires software and custom software?

AHRQ will make a listing of the software used in this project available in the AHRQ reading room (see response to question #6 for additional details). There is a turnkey clause in the existing contract and all software required for the performance of the contract shall be turned over to subsequent vendors.

9. Is there any related information technology considered proprietary by the current contractor and will not be transitioned to a new contractor? If so may we have a complete list of the technical and business functions served by this software as well as an explanation of the interdependencies between these proprietary solutions and the remainder of the IT solution to be transitioned.

See response to question #8 above.

10. Is there any component of the overall IT solution that will become obsolete within the next three years?

We do not have such concerns.

11. What areas has AHRQ targeted for improvement during the upcoming period of performance?

The RFP is self explanatory in this regard.

12. What percentage of the field interviewing will be done by phone?

The RFP specifies that all interviews shall be conducted in person, and the proposal should be priced so that all interviews could be done in person. In practice, we have permitted a small number of phone interviews. This percentage has varied from round to round but has always been under five percent, and usually much lower.

13. What are the files identified in 4.1.1 and what work is to be done?

The files are specified fully in Table 4.4.7(A). Data from the CAPI interviews are to be restructured, cleaned, edited and imputed to create usable analytic files.

14. Can you provide samples of questionnaire editing?

Editing specifications will be provided in the AHRQ reading room (see response to question #6 for additional details).

15. Please provide examples of communication and reporting mechanisms.

Copies of reporting mechanisms shall be made available in the AHRQ reading room (see response to question #6 for additional details).

16. To what extent are the incumbent-s key personnel and other staff contractually obligated to assist a new contractor by transferring knowledge, procedures and other information?

The existing contract contains a turnkey clause that requires the incumbent to turn over all materials and documentation needed for the contract activity to the new contractor.

17. Precisely what parts of this project require OMB clearance and how long do such clearances take?

All data collection for this contract (Household and MPC) requires OMB clearance. Clearance has already been received for the base period of the contract. Should there be a significant change in procedure, an amended clearance would need to be submitted. Clearance typically take 6 months.

18. Does the contractor make these reimbursements from funds it already has onhand and then bill the government? If so what has been the average reimbursement amount for these meetings?

Yes. For bidding, offerors shall assume transport from Chicago to Washington DC for all participants and, lodging and per diem according to the government travel schedule.

19. Does AHRQ require or advise that this facilitator be a full time employee of the contractor?

The facilitator is only required for those 2 meetings per year and need not be an employee of the contractor. The facilitator should be familiar with survey research in the health care area.

20. Please provide a copy of a monthly progress report

The reports required in this procurement are more expansive than those required in our earlier procurements; hence, an acceptable sample is not available.

21. Geocoding the database: where do we get this Census Data

There are a number of vendors that provide this data.

22. Does AHRQ consider the current DOS based CAPI application to be adequate to the project for the course of the upcoming contract term. Are there any plans to upgrade the instrument and make it accessible to respondents on the web?

We are considering re-programming our current CAPI in the future and have released an RFI soliciting comments from the public. The interview would remain interviewer administered; we have no plans to make the instrument available to respondents on the web.

23. Has AHRQ been able to identify a minimum DOL labor level to perform these tasks adequately?

AHRQ has not personally recruited or trained these interviewers.

24. Please provide a copy of training materials and manuals

These will be available in the AHRQ reading room (see response to question #6 for additional details).

25. What amount of time is currently allotted for training?

Initial training for household interviewers is 9 days of project specific training over a 10 day period. Bi-lingual training is another day and a half.

26. How many toll free lines are dedicated to this project

Our current contractor does not maintain dedicated lines, they are shared by multiple projects.

27. How long are such calls

We do not have statistics on average length of call.

28. What is the level and change in the number of calls

We do not have specific statistics on the level of calls through the field period. That might vary with the specific approach taken to contact the respondent. However, calls tend to be frequent in the first few weeks of field activity and then wane over time.

The document "MEPS HC Methodology Report" contains information on communications. (www.meps.ahrq.gov/MEPSreports/MethodologyRpt/MRIntro.htm)

29. What is the volume of calls now being conducted in Spanish (4.2.8)?

Section 4.2.8 refers to in person interviewing. Between 5 and 7 percent of interviews are conducted in Spanish.

30. What are these permission forms and how are they distributed and collected (4.3.2)?

Each person who has an eligible medical encounter signs permission forms so we may contact their provider for the Medical Provider Component. The specifications for the CAPI instrument contains information on the collection as does the MEPS HC Methodology Report.

31. What is meant by Anominating@(4.3.2)

In this case, nominating means that 2 or more respondents, perhaps across households identify the same hospital, physician or pharmacy as a source of medical care received during the reference period.

32. Do these interviewers require different qualifications than those in the Household Component? What about the MPC supervisors?

MPC interviewers and supervisors are different from those for the household. The interview is over the phone and is more similar to establishment interviewing. Medical office experience is valuable..

33. Do interviewers go into the field to conduct interviews? How many? For what?

We attempt to do all interviews in the respondents home, hence all of the interviewers are equipped with a laptop. The number of interviewers varies with sample size, dispersion of sample, and the expected work hours of the interviewers.

34. What is the workflow for this (monitor and track receipt of forms 4.4.3)?

Reports monitoring the receipt are required weekly during the field period. All receipt must be completed in time for the status codes to be loaded into the subsequent field period=s CAPI application.

35. and 36. What are these codes (section 4.4.5) and how are they used for classification? What documents will be provided by the government

ICD-9 International Classification of Diseases, 9th Revision

NDC National Drug Classification

BETOS

Coding manuals will be provided in the reading room (see response to question #6 for additional details).

37. What is the length of the option periods.

Each option period is 3.5 years. Option period 1 will be considered at the end of the first year of the base contract and option period 2 will be considered at the end of the second year of the base contract.

38. What is the Cheshire System?

Documentation will be provided in the Reading Room (see response to question #6 for additional details).

39. What is administration time?

Administration time is the length of time it takes an interviewer to conduct the actual interview and does not include travel time, time to complete administrative paperwork, time to contact and track respondents.

40. If a company has no corporate experience, yet has assembled a team of new employees and consultants with excellent personal experience and qualifications, will we be penalized in the grading visavis the incumbent.

Proposals will be evaluated as to the extent, relevance and quality of the offerors organizational/corporate experience as it relates to the requirements of this acquisition including an organizations experience in executing large complex studies involving multiple interdependent tasks. Personnel experience and qualifications is a separate evaluation factor.

41. What are the levels of respondent compensation?

Respondents are given \$5.00 at the time they are initially contacted, \$25.00 for each of the 5 in person interviews, and each adult in the household receives \$5.00 for each self administered questionnaire filled out (asked for twice per panel).

42. Can we get samples of subcontractor reporting done by incumbent?

Subcontract reports only provide percentages and do not designate which companies are being utilized. Should you desire a copy of any of these reports, you would need to submit a Freedom of Information Act (FOIA) request to me which I would forward to the appropriate office to determine whether or not this information is releasable.

43. All of the listed small business categories total only 15.5%; does AHRQ have categories of goals for the other 7.5%?

Small business is a designation in itself. The 7.5% is for those who are not listed in these categories. Please refer to Federal Acquisition Regulation (FAR) Part 19 for more details.

In additional to the questions above, the following language is hereby incorporated into Section H of the solicitation and will become a part of the contract:

H.12 SALARY RATE LIMITATION LEGISLATION PROVISIONS

Pursuant to P.L. 107-116, no Fiscal Year 2002 (October 1, 2001 - September 30, 2002) funds may be used to pay the direct salary of an individual through this contract at a rate in excess of the direct salary rate for Executive Level I of the Federal Executive Pay Scale. That rate is \$166,700 per year (calculated on a base of 2088 hours per year with an applicable hourly rate of \$79.83) for the period of January 1, 2002 through December 31, 2002. Direct salary is exclusive of overhead, fringe benefits, and general and administrative expenses. The salary limit also applies to individuals proposed under subcontracts. If this is a multi-year contract, it may be subject to unilateral modifications by the Government if any salary rate ceilings are established in future DHHS appropriation acts. P.L. 107-116 states in pertinent part:

None of the funds appropriated in this Act for the National Institutes of Health, the Agency for Healthcare Research and Quality, and the Substance Abuse and Mental Health Services Administration shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level I.

Contractors shall absorb that portion of an employee's salary (plus the dollar amount for fringe benefits and indirect costs associated with the excess) that exceeds a rate of \$166,700 a year.