

Responses to Vendor Questions

1. This is a CDC wide contract and will include the LAN/WAN and related work under the current Micro-computer Contract. This contract is a Small Business set aside. Please explain whether this portion of the contract will be bundled as is or will the percentage of work for small business be disbursed across the scope of the contract and contractors? How will this affect the balance of scope of work for other selected subcontractors and specialty contractors?

Answer:

The final decision on bundling has been rejected as written by the SBA and the Department of Health and Human Services. The final RFP will be issued and result in two awards, one using full and open competition procedures for the type work being performed under the current CISSS contract and one award using small business set-aside competition procedures for the work currently being performed for NIOSH under the two current competitively awarded total small business set-asides. The awardee under the full and open competition will be required to subcontract not less than 23% of the total estimated contract dollars to FAR Part 19 type companies and the small business set-aside will not be required to subcontract any portion of the work. The microcomputer services contract will not be bundled into this solicitation.

2. You state that you are requesting that IT work previously set aside for small businesses be bundled into this large contract. If you receive approval, has CDC identified any additional IT work that would be available for small businesses to compete for during the first three fiscal years following contract award? If so, what are they? If not, how does CDC plan to mitigate the negative impact on small businesses in the IT field.

Answer:

See Answer 1.

3. If you do not receive approval to bundle will you make multiple awards from a single solicitation or can we expect to see additional RFPs?

Answer:

See Answer 1.

4. Is this RFP a bundling into or out of SBA?

Answer:

See Answer 1.

5. Will there be a Collective Bargaining Agreement affiliated with this contract?

Answer:

There will not be a Collective Bargaining Agreement associated with this contract.

6. **Section I.10, Page 30, FAR 52.222-47, Service Contract Act and Wage Determination.** The Department of Labor-proposed regulations and the interim final regulations on the scope of the new exemptions for commercial services indicate that information technology work is now exempt except for data entry and scanning. See 65 Federal Regulation 45907, Section 4.123(e)(2)(i) (interim rule effective August 25th) and 65 Federal Regulation 45944 (proposed rule). Based on this interim rule, we request the exclusion of the Service Contract Act.

If the SCA clause must stand, we request information on (including a copy of) any collective bargaining agreement referenced in 52.222-47, along with the name of the unions involved, the affected labor categories, the location of these employees, and the quantity of hours subject to the Collective Bargaining Agreements. If no such agreements exist, we request the elimination of this clause as not applicable.

Answer:

CDC is not pursuing this procurement as purchasing commercial services. There is no Collective Bargaining Agreement associated with this contract. The final RFP will not include references to a Collective Bargaining Agreement.

7. (Section L.10, page 30, FAR 52.222-47 SCA Minimum Wage and Fringe Benefits Applicable to Successor Contract Pursuant to Predecessor Contractor Collective Bargaining Agreements)

Are employees on this contract unionized and covered by a collective bargaining agreement (CBA)? If yes, will a copy of the current collective bargaining agreement be included in the RFP?

Answer:

There will not be a Collective Bargaining Agreement associated with this contract.

8. (Section L.9) If the SCA wage determination is not available at the time of the release of the RFP, how soon can we request from the contracting officer a collective bargaining agreement, provided it is also not available?

Answer:

There will not be a Collective Bargaining Agreement associated with this contract.

9. Will CDC accept a bid from a consortium?

Answer:

Yes.

10. Does the statement no assurance of steady work mean CDC will support the cost for staffing areas without steady work?

Answer:

The Contractor should not assume that every position staffed will result in a 40 hour per week, full-time position. The Contractor should only staff for the work to be performed.

11. (Section G. 2) Please clarify the last phrase of the following statement: "When the application of the negotiated fixed rates against the actual bases during a given fiscal period produces an amount greater or less than the indirect costs determined for such period, such greater or lesser amount(s) will be carried forward to a subsequent period."

Answer:

This provision will not be included in the Final RFP.

12. (Section B.2 Time and Materials CLINS, page 3) Are the T&M rates to be proposed 100% Government site, 100% contractor site or a blended rate based on the splits provided in the RFP?

Answer:

The final RFP will provide percentages of on-site vs. off-site work. CDC anticipates that offerors will provide a blended rate and give the indirect rates for both in the Business Proposal.

13. **(Section G.5(a), p. 10, Maximum Amount and Payment)** The draft RFP states “The maximum amount of the Government’s liability under this Task Order shall not exceed \$ during performance of this Task Order.” Offeror requests clarification as to the type of liability intended to be covered by this provision and requests an indication as to the limit amount.

Answer:

This relates to Task Order ceilings and is the amount which the Contractor must not exceed for the work described in that particular Task Order. No dollar amount can be filled in prior to award of the Task Order because the dollar amount is Task Order specific.

14. **(Section C.3, Page 4, SOW)** This section states that “support consists of unified IT computing services for: (1) CDC-wide - the centrally managed, and funded portion of the contract is entitled CDC-wide and shall be as described in this Statement of Work; and (2) dedicated task orders – decentralized support requirements of the contract is entitled dedicated tasks, and is for specific CDC and ATSDR Centers, Institutes, Offices, and Divisions as described in individual task orders.” Section C, page 2, and Attachment J, page 19, provide estimated staffing levels by location. It is not clear from these referenced sections which seats are to be provided with support services as part of the initial “CDC-wide” award and which seats are to be provided as support services on subsequently issued task orders. Will CDC provide seat counts and locations for those seats to be included in the base “CDC-wide” award and, if possible, the seat counts and locations for planned subsequent task orders? As the number of seats supported increases, we may be able to offer CDC price breaks on a per-seat basis.

Answer:

In the final RFP, the Statement of Work will be corrected to remove these references to a CDC Wide portion of the contract. There will not be an initial CDC Wide award. All work and staffing requirements will be identified in individual task orders issued after contract award. The Section B Lab or Category Matrix includes all required labor categories and associated estimated hours.

15. **(Section L.16, Technical Proposal Instructions, Specific Instructions, page 61)** Section L does not include any requirement for offerors to discuss how they intend to market this ID/IQ vehicle to other Centers, Institutes, and Offices during the life of this contract. Will the Government consider adding specific instructions to offerors to provide details on their capabilities of managing and marketing large Government-wide acquisition (GWAC) and ID/IQ contracts? (see Part VI below for additional Section M recommendations).

Recommendation: The Government should include specific instructions to offerors to provide a detailed discussion of how the successful offeror will manage and market large this ID/IQ contracts after award. Discussion factors should include capabilities of managing and marketing large Government-wide acquisition (GWAC) and ID/IQ contracts, post-award marketing activities, demonstrable commitment to partnership, reputation and commitment in making CITS a highly successful ID/IQ. Additionally, the Government may also want to modify the evaluation factors for award reflecting the importance of this facet of the contract.

Rationale: The scope of work contained in the RFI focuses almost entirely on the core set of contract tasks to be performed (e.g., IS and programming support, user information/help desk, LAN/MAN/WAN support, etc.) and requires little discussion on the additional task order support requirements. While it is impossible to specifically define the support requirements in advance of the requirements, the Government can require offerors to describe the specific actions as well as the management and marketing processes the successful offeror will implement after award. The ID/IQ portion of this contract is a particularly important part of this single award, 7-year contract and may well define the long-term success of this contract in delivering high quality services and satisfying customer requirements.

Answer:

This is not a GWAC and marketing is not an evaluation consideration for the CDC. The CDC has no problem with appropriate marketing of the contract however the CDC does not feel marketing abilities are key to the success of this contract and therefore do not plan to associate evaluation points to this activity.

16. IRMO funds their own requirements, are they required to use this contract for all services?

Answer:

There is no requirement for the contract to be used for all services.

17. CDC has stated it plans to interact with its Federal, state, local, and private partners in health care. Can this contract be used as a GWAC vehicle for all CDC partners? Can the partners add money to the contract to purchase from the contract and/or will this contract fund the partners for work in their areas?

Answer:

This contract will not be used as a GWAC type vehicle. All task orders will be issued by CDC/ATSDR.

18. **Relationship to Other CDC Contracts:** This is not a requirements contract: How does CDC plan to meet the basic commitment of service to the CIOs. If other work in the special needs required by the CIOs can be met through the utilization of the services on the CITS contract, will the team be allowed to market our services to the CIOs and other partners?

Answer:

CDC has always and will continue to allow its Centers, Institutes and Offices (CIOs) the flexibility to use any contract vehicle deemed most appropriate for a particular task requirement, whether under CDC's CITS contract or under another agency's GWAC. The CITS contractor team will be allowed and encouraged to market their services to the CIOs but not to CDC's public health partners.

19. **(Section G.2 (a) Negotiated Overhead Rates)** We believe this clause indicates that the Government will negotiate fixed overhead rates for each contract period which will be adjusted to coincide with the contractor's DCAA approved provisional indirect rates at such time as those rates are agreed upon between the contractor and DCAA. Is this belief correct? If not, please clarify.

Answer:

This provision will not be included in the Final RFP.

20. What is the payment cycle for CDC ? (invoice to payment)

Answer:

CDC pays in accordance with the Prompt Payment Act.

21. **(Section B.1)** specifies the estimated reimbursable costs and fixed fee for the contract and identification of Time and Materials CLINS (fixed hourly rates) in Section B.2. Attachment J.1 entitled "Section B – Time and Materials Matrix for Loaded Hourly Rates" implies the entire contract should be priced as a Time and Materials type contract. Is it correct to assume offerors should derive the total estimated cost and fixed fee for the contract based on the labor categories and hours provided in J.1?

Answer:

The final RFP will be more clear and the level of effort attachments will be broken into cost plus fixed fee, time and materials and firm fixed prices. The entire contract will not be priced as a T&M type contract. It is clear that CDC believes the preponderance of the work will be cost plus fixed fee. We will be awarding the overall contract as a cost plus fixed fee type contract which can accommodate firm fixed price, cost plus fixed fee, and time and materials task orders.

22. Are the rates to be proposed in the **Section B** tables Time and Materials (T&M) rates, inclusive of fee/profit? Or, are the rates to be provided in the Section B tables "cost only" rates (i.e., direct labor burdened with indirect rates, but excluding fee)?

Answer:

In both the firm fixed price and time and materials type task order environments, the rates are inclusive of fee.

23. Please clarify how the rates to be given in **Section B** will be used in the Cost-Plus Fixed Fee environment, the T&M environment and the Fixed Price environment for individual task orders. Will these rates be ceilings in all environments or only in the T&M and Fixed Price environments? Can the rates be discounted for individual task orders?

Answer:

The final RFP will have a comprehensive Section B. That Section B will clearly state how to complete the Section and what type of cost and pricing information is required.

24. (**Section H.19**) Will the government add provisions to ensure that the rental or leasing agreements are done in accordance with federal procurement regulations since the government is considering exercising the option to purchase?

Answer:

Yes. Applicable FAR clauses will be incorporated into the final RFP.

25. Will this contract remain a small business contract?

Answer:

See Answer 1.

26. The government intends to award an estimated Cost –Reimbursement contract to the Prime Contractor/System Integrator, with different types of pricing scenarios for Task orders. However the government does not indicate whether the sub-contractors must also be cost plus compliant. Many sub-contractors who can deliver best practices may not necessarily be cost compliant, and would limit the expertise they can bring to CITS. Please clarify.

Answer:

There is no requirement for the prime to impose a cost type subcontract on their subcontractors. Primes are responsible for awarding subcontracts with pricing arrangements both consistent with Federal Government accounting requirements and what the subcontractor currently can perform. For example, a prime could have a subcontractor without an approved cost accounting system and offer that subcontractor a fixed price subcontract. Under a CPFF task order, the subcontractor would be able to perform work using their loaded rates as long as the contracting office could affirm that the rates proposed are reasonable for estimating purposes.

27. The requirement for a Small Disadvantaged Business Participation Plan seems to be misplaced under "**Historical Metrics.**" The language is different from FAR Part 19 Adherence requiring a subcontracting plan. What is the difference between a "Participation Plan" and a "Subcontracting Plan?" We agree that the offeror's past performance in the area of compliance with small business plans should be evaluated, but the requirement for submittal of a new should not be addressed in the section discussing Historical Metrics. If this in fact a different requirement from the subcontracting plan, more details of the participation plan content should be provided for the offeror.

Answer:

FAR Part 19 Adherence includes a requirement for a new Small Disadvantaged Business Participation Plan. The draft RFP calls for offerors to include a discussion of their experience with the requirements for a Small Disadvantaged Business Participation Plan under Past Performance because that discussion is a component of their historical metrics.

28. (**Attachment J.2 – Section C.19.e**) The draft RFP states, "The Contractor shall make a reasonable charge for the evaluation of the SOW." Please clarify the meaning of this, including how this would be defined and monitored, and how this would affect subcontractors.

Answer:

The Contractor will not make a charge for the evaluation of a SOW. SOW evaluations are considered part of the Task Order process. The final RFP will not include this language. Subcontractors are not affected unless the SOW is being reviewed by a subcontractor.

29. **(Section C.18, 34 of 39, Term Task Orders)** The draft RFP states, “Term task orders cannot cross contract performance periods.” Please clarify why term task orders are not to cross contract performance periods. Will surplus prior fiscal year funding on task orders be available for de-obligation and re-obligation by the Government against continuing term task orders into subsequent performance periods?

Answer:

Appropriations law for Severable Services governs this. Term Task Orders are for work that is likely to continue from contract year to contract year (level of effort type work). Options however, are exercised at the discretion of the Government; the Government is not required to continue work beyond the end date of a contract period of performance. There is one type task order that can go beyond the contract period of performance. These are product type task orders. CDC can de-obligate unused current fiscal year money in a term task order and re-obligate it under a new task order if it is in the same fiscal year. CDC is unable to re-use any prior year funds.

30. **(Section E, Inspection and Acceptance, page 6 of 73)** Given the fact that the RFP references Fixed Price Orders, does the Government intend to include Fixed Price Contract Clauses in the final RFP?

Answer:

The CDC plans to include Fixed Price contract clauses in the final RFP.

31. **(Section L.1 (f) “Contract Award”)** Will this be a single award vehicle or are multiple contracts a possibility? If done as a multi-award contract, will tasks be directed to specific vendors or will they always be competed among the awardees?

Answer:

See Answer 1. Also, the CDC always reserves the right, in this solicitation, in Section L.1(f) to make multiple awards as it sees fit. It is impossible to make a determination on how it would work at this point in the procurement.

32. **(Section L.2, Type of Contract)** There are no provisions for firm fixed price in this solicitation. Please clarify.

Answer:

The CDC plans to include Fixed Price contract clauses in the final RFP.

33. **(Section L.2 Type of Contract, page 55)** The Government anticipates awarding a single award ID/IQ CPFF contract with additional provisions for negotiated CPFF, T&M, or FFP task orders. Will the Government consider including award and incentive fee engagements in this Section in light of the desire to take advantage of performance-based contracting in specified task orders?

Recommendation: Include contract provisions to allow for award fee and/or incentive fee task order arrangements to take maximum advantage of performance-based contracting.

Rationale: For task orders where Government performance objectives can be adequately determined, award and incentive contract types are the preferred acquisition strategy for the Government to measure the contractor’s ability to meet those performance objectives. Ideal applications include any arrangement when judgmental standards can be fairly applied and potential fee would provide a meaningful incentive. Incentive fee contracts are ideal for research, development, and test initiatives for a major system where a profit incentive is likely to provide motivation for more effective management. In these cases, the contractor’s incentive would be to realize a higher fee by completing the work at a lower cost and/or by meeting or exceeding objective performance targets.

Answer:

The CDC will not consider award fee or incentive fee task orders.

34. **(Section E.1 Inspection And Acceptance)** Please clarify why FAR 52.246-4, Inspection of Services – Fixed-Price (Aug 1996) is cited if the Government intends to award on a cost basis?

Answer:

CDC plans to include Fixed Price contract clauses in the final RFP for use with fixed priced task orders.

35. **(Section J.2 – Attachment C.18)** Regarding the Government’s description of “product task orders,” does the Government intend for all of these to be fixed price task orders or could these be CPFF/Completion type?

Answer:

CDC anticipates that product type task orders will be fixed price. However, there may be some instances where product task orders could be cost type task orders.

36. **(Section L. P. 55, L.2)** This talks about task orders being cost plus fixed fee, firm fixed price or time and materials. Have we told mentioned what we expect will be firm fixed price, time and materials and cost plus. For example keypunch hours could be firm fixed price. If they know what we expect, this may make a difference in their pricing structure.

Answer:

The final RFP will discuss what the Government believes might be firm fixed price and time and materials type work.

37. **(Section L.2, FAR 52.216-1, Page 55, Type of Contract)** The information provided in this clause states that the CDC will award an ID/IQ contract with the potential to have CPFF & T&M task orders issued under the resulting contract. What will Offerors be given to price the CPFF portion so that a ceiling will be developed? We recommend that paragraph L.2 be modified to reflect the primary contract type anticipated by the CDC. If both types of task orders are anticipated, we request that the CDC modify the Section B pricing tables to allow Offerors to respond to two different contract types.

Answer:

The overall contract will be cost plus fixed fee. The final RFP Section B will have sections to accommodate firm fixed price and time and materials type pricing structures.

38. **(Section C.17, Personnel Clause, page 34 of 39)** Given the fact that Cost Plus and T&M contracting options are used on a best efforts scenario (Term Task Orders), please clarify when CDC intends to issue Product Task Orders versus Term Task Orders. Are Product Task Orders considered exclusively firm fixed price or could they be T&M or cost plus?

Answer:

CDC anticipates that product type task orders will be fixed price; however there may be times when they could be cost type. Product task orders are appropriate when the government and contractor agree that a product is the result of the work and deliverables are specified with a great deal of accuracy and certainty.

39. **(Section L.2., page 55, Type of Contract)** The draft RFP states “The Government contemplates a single award ID/IQ cost plus fixed fee type contract” and “... task orders will be negotiated as either cost plus fixed fee, firm fixed price, or time and materials.” Can the Government clarify the statement on the contract type since the stated intent of the Government is to negotiate task orders using different contract types? Is the intent to award an ID/IQ contract rather than an ID/IQ cost plus fixed fee contract?

Answer:

The stated intent of the government is to award a cost plus fixed fee type contract with the potential to award cost plus, T&M, and firm fixed priced task orders.

40. **(Section L.2: Paragraph L.2 on page 55)** indicates that the contemplated contract will be an “ID/IQ cost-plus-fixed-fee type contract.” In the last sentence of the same paragraph, the document indicates that, depending on the scope of work in any task order, the task orders may be negotiated as CPFF, FFP, or T&M. These two statements are somewhat in conflict. Additionally, there may be instances when a combination of CPFF, FFP, and T&M may be in the Government’s best interest.

Suggestion: Delete the language in the first sentence following “ID/IQ.” Change the last sentence to allow CPFF, FFP, T&M, or any combination of the three forms.

Answer:

The Government will award an ID/IQ cost plus fixed fee type contract because cost plus fixed fee type work is the type work CDC believes to be where the preponderance of the task orders will fit. However, there are scopes of work which may well be accomplished the best using firm fixed price or time and materials type pricing structures; therefore CDC allows for task orders to be cost plus, T&M and firm fixed price.

41. **(Section H.16, Training for Contractor Employees, page 19)** Will CDC issue a separate Task Order to accommodate the billing of the contractor labor costs incurred as a result of CDC directed training?

Answer:

The CDC does not anticipate issuing separate task orders for training.

42. **(Section H.16, “Training of Contract Employees”)** Can such training be charged back to the Government? The clause states, in effect, that such training may be required. Is it expected that all, some, or none of the training specifically required by this contract be paid for by the Government?

Answer:

The cost of training will be decided on a case by case basis. CDC anticipates that the Contractor will pay for training when training is required to advance technical skills of the employee

43. **(Section C.9. (g), page 28)** We suggest CDC provide estimates of the amount of travel and associated equipment required to support these conferences and associated activities.

Answer:

CDC does not believe additional information is necessary beyond which we have already provided.

44. **(Sections C.8, Page 9 and L.17, Page 68)** The CDC has provided specified amounts for Travel and Training for each of the contract periods of performance. In the following sections, CDC has specified that the Offeror will perform a variety of functions that will result in the expenditure of other direct costs:

- Section C.5(c)1, Page 6, Microcomputers and LANs
- Section C.8.F, Page 20, Microcomputer Hardware Maintenance, Repair and Support.
- Section and C.8.F (4), Page 21, Equipment Repair and Spare Parts Replacement.
- Section C.8.F (5), Page 22, Warranty Work.
- Section C.8.G (1), Page 24, General Software Support.
- Section C.8.I, Page 26, Training Facility
- Section L.17, (c)1c., Page 69, Business Proposal Instructions

To allow all Offerors to compete on an equal basis and to enable CDC to make a more realistic evaluation of each Offeror’s price, will CDC provide a specified other direct cost amount, similar to that provided for travel and training for each year of contract performance for:

All maintenance, repair and support, and spares

Packing, crating, and handling services for any items that must be shipped for warranty repairs
Acquiring Commercial Off-the-Shelf software
Furnishing a training facility for CDC's use, including the facility, hardware, software, and any technology refresh?

Answer:

No.

45. **(Section L.17.(b)(1)d.(1), page 70), Cost and Pricing Data** The draft RFP states, "Unless previously submitted to the office issuing this Request for Proposal, copies of your current established wage and salary schedule and travel policy must be submitted with the proposal." Please elaborate on the purpose of this requirement. Many companies do not have an "established wage and salary schedule and travel policy." Their wages and salaries are market driven while travel expenses are recovered on the basis of customer policies or contracts.

Answer:

CDC has an interest in knowing how offerors establish salary rates and travel costs. These policies are submitted with the Business Proposal and are an invaluable aid in analyzing Business Proposals. This information directly supports the wages we require offerors to submit and is also used for supporting documentation in analyzing how the offeror will accumulate costs for travel.

46. **(Section L.17, p. 72, Business Proposal Instructions, Other Administrative Data, (4)**

The draft RFP states "(4) Your proposal must list any current commitments with the Government relating to the work or services and indicate whether...". Please clarify the need to list any current commitments with the Government. Offeror suggests alternative wording to meet the intent, such as "List any commitments with the Government that will interfere with the completion of work and services required under this proposal." Clarification of the phrase "relating to the work or services" is also requested.

Answer:

Thank you for your suggestions; however, the current language is adequate. It is important that CDC review current offeror commitments for the same type of work called for in the RFP. The information assists CDC to determine, based on what the offeror submits in their Technical and Business Proposals, whether the offeror has the resources to take on this additional work and to help CDC make a risk determination on the likelihood of successful contract performance.

47. **(Section L.11 HHSAR 352.215-1, page 57, Restriction of Disclosure and Use of Data (April 1984)** The bottom of page Section L, p. 57 of the draft RFP states "The data subject to this restriction are contained in pages (Insert page numbers, paragraph designations, etc. or other identification)." Can the Government delete this sentence or clarify the intent and reference of this sentence?

Answer:

This information is to be completed by offerors. Therefore, there is no reason for CDC to delete this paragraph. If your firm has no references to include in this paragraph, so state when you submit your proposal.

48. **(Section C.20 (f) – "Employee Listing")** We assume that data is needed for any subcontractors who are supporting this contract. Does the data need to be separated for the prime and each subcontractor? Is the data to be presented by task or just on a full contract basis?

Answer:

The data does not need to be separated for the prime and each subcontractor. The contractor must identify, on a full-contract basis, which company an employee works for and the task order number.

49. What are the vendor selection criteria?

Answer:

The Evaluation Criteria themselves are located in Section L of the RFP and how the government will analyze them is located in Section M of the RFP.

50. Since subcontractor staff can be designated as Key Personnel, and offerors are encouraged not to offer exclusive subcontracting agreements with potential subcontractors, how will the CDC point-score proposals in which the same subcontractor staff are proposed as Key Personnel in multiple proposals?

Answer:

Each proposal regardless of its team members will be evaluated in accordance with the criteria set forth in the RFP. The same subcontractors could appear with more than one prime offeror. That would not, in and of itself, result in an increase or decrease in the evaluated merit of the proposal.

51. **(Section L.16.4, page 65, Past Performance and Historical Metrics, Historical Metrics)** The draft RFP states “4. On all previous or current cost-type contracts identified in (2) above.” Please clarify the reference to “... identified in (2) above...” Is this in reference to the past performance citations and if yes can the Government provide a reasonable limitation to the number of cost-type contracts in lieu of “all previous or current?”

Answer:

The final RFP will clarify this.

52. **In the Historical Metrics section:** Can you clarify if the CDC really wants the “historical metrics” to be just for referenced contracts? This conflicts with your wording that requests these metrics be for “your company” and “your firm.” In fact, most of the metrics are most appropriate at the “company” level and would provide CDC with more comprehensive information about the bidder. Subsection 1. SW metrics: To the sentence “Identify what software development performance measurements your company uses...” consider adding “...and describe how these measures are used.” Once again, this would provide CDC with more in-depth information for evaluation of bidders in this important area.

Labor-hour costs metrics: This should apply only to the pertinent (cost-type) referenced contracts. Clarify what is meant by “data on.” Is this figure by contract year, or something else? Also, clarify what is meant by “weighted.” Is this weighted by FTE level applied against each individual labor category, or by another scale? Finally, is the “average,” the average over all of the contract labor categories?

Labor relations metrics: If employees have a healthy respect for the grievance procedure as a fair and just mechanism, it may result in a number of grievances filed on relatively minor issues. Hence, the number of grievances filed could be a representation of the perceived legitimacy and efficacy of the complaint procedure. However, the number of arbitrations may be a better indicator of the health of the relationship between the company and its employees and union because the frequency of arbitrations may be a statement on the parties’ inability or unwillingness to resolve disputes among themselves.

Small Disadvantaged Business Participation Plan and Historical Results: Why does CDC ask for a participation plan here rather than in the Subcontracting Plan section that follows?

Answer:

CDC has received a number of comments and suggestions which have a bearing on the evaluation criteria. We have reviewed this input and the final RFP will contain the results of our assessment.

53. **Section M.3 Proposal Evaluation Criteria, Point Assignment**

We request further stratification of the point assignment within the Past Performance and Performance Metrics section of the Technical Proposal and recommends that the Past Performance section carry a higher point assignment than the Historical Metrics. The Historical Metrics provide a quantitative indication of the overall management ability and viability of a company whereas the Past Performance subsection is focused on execution and delivery excellence.

Answer:

CDC does not intend to provide further stratification.

54. **(Section L.16.3, Page 64, Past Performance and Historical Metrics and Section M.3, Page 80, Criterion 3 - Past Performance and Performance Metrics)** Section L.16 describes significant factors in determining degree of relevance and similarity of cited past performance to CITS work. Section M.3 indicates that the degree of relevancy will be a scoring factor in the evaluation.

In some instances, government agencies have identified very specific relevance indicators as “pass/fail” criteria for determining past performance relevance. For example, a recent Environmental Protection Agency procurement (the “Facilities Administration and Information Resources” or “FAIR” contract) included minimum contract size as a mandatory relevance criterion. A Patent and Trademark Office procurement (the “Systems Development and Maintenance” or “SDM” contract) included a mandatory requirement for the bidding organization to have achieved a Software Engineering Institute Level 3 or higher under its “Capability Maturity Model.” This type of criterion benefits the government by (1) assuring that competitors who bid have demonstrated a proven level of quality and an ability to manage contracts of the same size, scope, and technical complexity and (2) provides a “go/no-go” gate that eliminates the need for the government to evaluate proposals from offerors which will be unable to meet the quality and management requirements of the contract. Second, it benefits offerors because it gives them the opportunity to quickly determine whether to spend the considerable resources necessary to bid a procurement of this magnitude.

Will CDC consider developing specific past performance relevance criteria such as contract size or SEI CMM maturity as part of CITS proposal requirements?

Answer:

CDC has received a number of comments and suggestions which have a bearing on the evaluation criteria. We have reviewed this input and the final RFP will contain the results of our assessment.

55. **(Section L.16 (3) – “Past Performance and Historical Metrics”)** Is there a minimum number of Past Performance References that must be used?

Answer:

There is no minimum. The final RFP will reflect a maximum of 5.

56. **(Section M.4, Relationship Between Cost or Price and Technical Strength)** How does the Government plan to calculate the evaluated price? Will separate rate schedules be required for on- and off-site work, T&M, and cost reimbursable, various locations, prime and sub? How will fee for cost reimbursable tasks be evaluated? We recommend that CDC simplify the cost evaluation by requesting only Cost Plus Fixed Fee Cost proposals.

Answer:

CDC has stated that the contract type is cost plus fixed fee. T&M and fixed prices proposed for task orders of those types will be evaluated for fair and reasonable determinations by looking at the offeror’s consistency with their cost plus fixed fee rates and by comparing the fixed prices/loaded rates with Federal government awarded contracts for similar work to determine these rates as fair and reasonable. Cost plus fixed fee task order fees will be negotiated at the time the task order is negotiated and will be evaluated based on the complexity of the work needed in the task order.

57. The Evaluation Criteria is not attached for the Performance Evaluation Report (page 10).

Answer:

The Performance Evaluation Report will be included in the final RFP.

58. **(Section M.3 Part I, Criterion 2—Proposed Resources and Approach)** “The criterion will be scored on the strength and proposed resources and approach that the offerer will commit to address the requirements.” Since the quality of CDC’s contractor support is directly related to the contractor’s ability to manage resources and leverage corporate capabilities, will CDC consider specifically adding the following sentence?

“This includes the evaluation of a Management Plan and Organization Structure that describes how the offeror will deliver staff and manage the overall contract, detailing its proposed management techniques.”

We also suggest elevating management in the evaluation scheme to a separate category and allocating evaluation points to account for the importance of this activity.

Answer:

CDC has received a number of comments and suggestions which have a bearing on the evaluation criteria. We have reviewed this input and the final RFP will contain the results of our assessment.

59. Who will be making the vendor selection?

Answer:

The Source Selection Authority in conjunction with the Contracting Officer will be making the final vendor selection.

60. **(Section L, p.66)** states that points will be assigned to subcontracting plan. A contradictory statement is made on p.68 stating no points will be assigned to subcontracting plan. Please explain.

Answer:

The required DHHS Sub contracting Plan itself is to be submitted with the Business Proposal. The DHHS Subcontracting Plan is reviewed by the CDC Small Business Program Manager and contracting office. It is not part of the FAR Part 19 Adherence evaluation criterion and no points are assigned.

61. The subcontracting plan is part of the business portion – p.82 states that no quantitative scores will be assigned to this portion. However, FAR 19 Adherence is assigned the highest evaluation score. Please clarify.

Answer:

FAR Part 19 Adherence instructions in Section L and the evaluation methodology in Section M relate entirely to the language found in those sections of the RFP for that Evaluation Criterion. Offerors submit this information with Technical Proposals. The DHHS Subcontracting Plan itself has no assigned quantitative score and is submitted with the Business Proposal.

62. **(Section L.16 Technical Proposal Instructions)** Under General Instructions the 6th bullet has the requirement for demonstrating public health, or health domain expertise. If a Prime contractor/bidder meets this requirement but proposes as a member of his bidding team a firm with strong technical qualification in other “bulleted” areas will the prime contractor be penalized for bringing this other technical expertise to bear for the Government?

Answer:

Not unless the prime fails to show sufficient expertise and resources so that CDC is convinced that the prime can not only manage the contract as proposed but could perform and manage the work in the event the subcontractor with the demonstrable public health or health domain expertise should not perform.

63. Given the maturity of the IT software industry, CDC may want to consider specifying an SEI CMM Level-3 certification for tasks to produce software under this contract.

Answer:

Thank you for this suggestion; however, CDC has decided not to make this change.

64. **(Section J, Contractor Service Response Requirements Service Level Measurements)** the Government references performance criteria for Help Desk/Hotline support and response and resolution criteria for video conferencing support calls; hardware, networks, and server related calls; software related calls; and emergency/after hours response. Would the government

consider adding a requirement that contractors provide performance metrics for these items in Section L.16.3 Past Performance and Historical Metrics?

Answer:

See Answer 1. Also, CDC has received a number of comments and suggestions which have a bearing on the evaluation criteria. We have reviewed this input and the final RFP will contain the results of our assessment.

65. **(Section C.8)** contains two sub-sections marked “B” on pages 11 and 15. It is our interpretation that these are separate sub-sections. Would the government please clarify the numbering and associated titles?

Answer:

The section numbering will be corrected in the final RFP.

66. **(Section L.16)** Regarding the type size, we request that the Government clarify its statement of “12 pitch font.” We recommend that this be changed to “12 point font.” Twelve pitch means 12 characters per inch, whereas a font size of 12 is entirely different.

Answer:

The wording in the final RFP will specify 12 point font.

67. The instructions specify a 12-pitch font for text. We assume CDC means a 12-point proportional font. Please clarify. Also, what minimum point size is required for graphics and tables? We recommend 8-point as a minimum font size.

Answer:

The final RFP will be reworded to specify 12 point font. The minimum font size on graphics and tables will be 10 point.

68. **(Section L.14, Proposal Format, page 59)** The Draft RFP states that 8.5 inch by 11 inch paper with one inch margins, 12 pitch font, and single spaced lines will be used except for any special charts, tables or diagrams that may be necessary. Will 11 inch by 17 inch foldouts be counted as one page, when used for graphics, charts, etc?

Answer:

Yes. Each 8.5 inch by 11 inch sheet will be counted as a separate page. The final RFP will restrict the use of paper other than 8.5 inches by 11 inches.

69. **(Section L.13.(e); L.14: In paragraphs L.13.(e) and L.14, starting on page 58)** the Government is requesting proposals to be submitted on “high-grade” white paper that can be recycled. Can you be more specific as to what the Government considers high-grade paper? Also in some areas even high-grade white paper cannot be recycled if it is printed with colored ink. Is it permissible to use color in this proposal?

Answer:

Make your decisions knowing that the intent of this language is that the Government wants to receive proposals on paper that can be recycled. If there is a doubt that colored ink cannot be recycled, do not use it.

70. **(Section L.16, page 64)** contains a reference to section L.16(b)3 which is not currently identified in Section L.16. Would the government please clarify the section to which this refers?

Answer:

The section numbering will be corrected in the final RFP.

71. Why is there a 10/31/00 deadline for sealed offers on the SF 33? This conflicts with the Notice to Offerors.

Answer:

These dates will be corrected in the final RFP.

72. Should deliverables identified in **C.20** also be identified in **F.1** as deliverables?

Answer:

All contract deliverables will be identified in Section F in the final RFP.

73. **(Page 59, L.14, Third paragraph)** I think we need to say “You must submit an original and 9 copies of your associated Oral Presentation Materials, Technical Proposal and your Business Proposal”...

Answer:

The number of copies required will be clarified in the final RFP.

74. **(Section B, Loaded Rate Table for Option Year 3)** It appears as though the ADP Security Specialist was inadvertently omitted from the referenced table. Please clarify.

Answer:

This information will be addressed in the final RFP.

75. Why is the “procurement sensitive” statement on the SOW?

Answer:

This was inadvertent and will not appear in the final RFP.

76. **Section E** provides a clause for Inspection of Services – Fixed Price but it is not referenced anywhere else. Is this an oversight?

Answer:

No. There will be additional fixed price clauses and provisions in the final RFP for use with fixed price task orders.

77. J.31 On the second page where we list total for 1997-98 - Do we have any 1999 data? We could include some data in 2000 if we have it. I think the most current data would be best.

Answer:

The most current data available will be provided in the final RFP.

78. **(Section C.3, page 4, paragraph 1)** of the statement of work, please clarify the phrase “unified IT computing services”.

Answer:

This phrase was intended to convey the idea that the contractor must be capable of supporting the full scope of activities identified in Section C at all CDC locations as stated in individual task orders.

79. **(Section C.8 page 9 – 2nd paragraph)** What are “necessary facilities”? Please provide examples of what this might include.

Answer:

Unless facilities are specifically mentioned as being provided by the Government in the RFP, the contractor will be expected to provide working space and facilities for all services provided. Necessary facilities include a training room, help desk facilities, etc.

80. You state that Section J is not complete. Do any of the missing attachments provide regulatory requirements or guidance? If so, these attachments would be essential. Additionally, some of the sites listed are not accessible.

Answer:

The Government intends to post all Attachments electronically with the final RFP.

81. Please explain the statement “the contractor shall inform the appropriate TM of incumbent personnel”.

Answer:

This reference included in the SOW under the heading of Transition and Startup means that the contractor should notify the Government Technical Monitor who is responsible for a particular task order, of any incumbent contractor personnel who will not continue working under that task order.

82. Does CDC have a definition for “as-needed” that can be provided to bidders?

Answer:

CDC would need to consider the particular context of that phrase. This question did not provide the specific reference needed for CDC to adequately respond.

83. **(Section C.9(h), Page 28, Organizational/Administrative Considerations, and Section J.3 and J.27)** The last paragraph states “...the contractor shall provide the appropriate hardware and software, for those microcomputer and LAN software packages listed in Attachments J.3 and J.27 ...”. Attachment J.3 appears to be the IRMO Strategic Plan and Attachment J.27 appears to be Programming Estimated Level of Effort Table for Labor Categories. These appear to be incorrect references to the hardware and software referred to by the SOW paragraph. Please clarify.

Answer:

The final RFP will only reference the CDC LAN Standards. This will be corrected in the final RFP.

84. **(Section I.1 (for Cost and T&M))** We assume that FAR 52.227-14, Rights in Data – General (6/87) was inadvertently omitted. Please confirm.

Answer:

No. CDC will not be using that clause.

85. **(Section L.16.3, end of first paragraph, page 64)** Examples and descriptions shall be limited to the technical proposal page limitations specified in Section L.16 (b) 3. L.16 (b) 3 does not exist. We believe this reference should be L.16, specifically the 100 page limitation.

Answer:

The Government intends to correct the numbering of the RFP in the final RFP.

86. **(Section L.16.3, page 64, Past Performance and Historical Metrics, Past Performance)** The draft RFP states “The examples and descriptions shall be limited to the technical proposal page limitations specified in Section L 16 (b)(3).” Please clarify the Section reference since the specific Section number is not identified in the draft RFP.

Answer:

The Government intends to correct the section numbering in the final RFP.

87. **(Section J Attachments)** Would the government consider stating the section and attachment number at the top of the initial page of each attachment?

Answer:

Yes. We will consider that idea.

88. **(Section L-17)** The RFP specifies a 200-page limit on the cost volumes for this proposal. Will the government consider removing the 200-page limitation on the Business Proposal?

Recommendation: It is our recommendation that the government remove the page restriction in L-17.

Rationale: Based on previous experience with proposals with similar requirements, as well as the size and complexity of the CITS contract, business proposals can exceed 1,000 pages or more, depending on the specific cost or pricing data required by the Government. It is customary for offerors to submit only that data required by the solicitation and their approved cost estimating practices. Including such a restrictive page limitation would require offerors to greatly limit the cost and pricing data supplied to the Government thereby making evaluation much more difficult.

Answer:

The page limitation will be removed in the final RFP, however, there will be additional language in Section L of the final RFP relative to the submission of the Business Proposal which offerors must take into account.

89. **(Section L. 17 “Business Proposal Instructions”)** states business proposals shall be limited to 200 pages, all inclusive. We request that the Government remove the 200 page limitation as a proposal that fully complies with FAR Part 15 will far exceed such a limit. In lieu of requiring cost or pricing data with the initial submission, would the Government consider stipulating the potential for such a requirement in the future should adequate price competition not be achieved? As another alternative, will the Government allow offerors to submit items such as the Representations and Certifications, Subcontracting Plan, Basis of Estimates, Subcontractor Proposals, and other related documentation as attachments to the business proposal that are not included in the page count?

Answer:

See Answer 88 above.

90. **(Section L.17, page 68, Business Proposal Instructions)** Recommend that CDC delete the 200-page limitation on the business proposal for 2000-N-00120. Please remove the requirement for submission of Cost and Pricing Data, as this is a competitive acquisition.

The price/cost data alone that CDC requires of the prime and potential subcontractors for a contract 84 months in duration will exceed the 200-page limitation.

Answer:

See Answer 88 above.

91. **(Section L.17, p. 68, Business Proposal Instructions)** Offeror requests the removal or an increase in the 200 page limitation for the Business Proposal to allow adequate room for explanation of disclosed practices and requested information.

Answer:

See Answer 88 above.

92. **(Section L.16, p. 62, Specific Instructions)** The draft RFP states “The proposal must be accompanied by a cross-reference table that relates the technical evaluation criteria and sub-criteria sections to proposal page numbers.” This statement appears after the statement “The Technical Proposal is limited to 100 pages for topics listed above” and therefore it is assumed that the cross reference table is not included in the page limit. Is this assumption correct? If not, it is requested that the cross-reference table be omitted from the page limitation since it does not contain content in and of itself.

Answer:

The Government intends to clarify the page count in the final RFP. Currently, the Government intends to keep the Technical Proposal page limit at 100 pages. The Table of Contents, the List of Tables and Drawings, the resumes of Key Personnel, and the Cross Reference Matrix will not be included in the page count. The Executive Summary will be included in the page count. Tabs that contain no other information than the section name and/or number will not be included in the page count.

93. **(Section L.16.B Specific Instructions/ Page Count Limitation)** “The Technical Proposal is limited to 100 pages for topics listed above.” Please consider excluding the “Table of Contents including index of any tables & Drawings” and the “Executive Summary” from this limitation since these topics will not be evaluated per Section M-Evaluation Factors for Award.

Answer:

See Answer 92 above.

94. **(Section L.16, p. 61, Specific Instructions)** The draft RFP states “The Technical Proposal is limited to 100 pages for topics listed above.” The listed topics include “Key Personnel Resumes” that are limited to two pages per resume for all designated personnel. The key personnel labor categories and evaluated case indicate a significant number of individuals to be proposed and hence constitute a significant total number of pages for resumes within the 100 page limitation of the Technical Proposal. While the two pages per resume is acceptable, Offeror requests that this topic, “Key Personnel Resumes,” be removed from the 100 page limitation to allow offerors the full 100 pages for the other Technical Proposal topics.

Answer:

See Answer 92 above.

95. **(Section L.16 “Technical Proposal Instructions”)** limits the Technical Proposal to 100 pages that include the Table of Contents and Key Personnel Resumes. We request that the Government remove the Table of Contents, tabs, and Key Personnel Resumes from the page limitation.

Answer:

See Answer 92 above.

96. **(Section L.16 “Technical Proposal Instructions”)** requests a cross-reference table. Is the cross-reference table to be included as an attachment? We assume the cross-reference table will not be included in the page count. Is this assumption correct?

Answer:

See Answer 92 above.

97. **(Section L.16, Technical Proposal Instructions, Specific Instructions, page 62; L.16.5 Key Personnel Resumes)** The proposal instructions state that the Technical Proposal is limited to 100 pages and the Key Personnel Resumes are limited to 2 pages each. Are the Key Personnel Resumes included in the 100-page limit of the Technical Proposal or are they in addition to the 100

pages? Do the Table of Contents, List of Figures, Title Page, dividers, and other pages that do not contain narrative also count in the 100-page limit? Are foldouts permitted and if so do they count as 2 pages?

Answer:

See Answer 92 above. Key personnel resumes are not included in the 100 page limit. The Table of Contents, List of Figures, Title Page, dividers, and other pages that do not contain narrative will not be counted in the 100 page limit. Foldouts are permitted and if they are charts, etc., will count as one page; if they are narrative, they will count as more than one page. The count on narrative foldouts will be directly relational to how large the foldout is. The final RFP will restrict the use of paper other than 8.5 inches by 11 inches.

98. **(Section L.16, p. 61, Specific Instructions)** The draft RFP states “The Technical Proposal is limited to 100 pages for topics listed above.” The Offeror acknowledges and supports the use of page limitations as an effective mechanism to provide parity in the amount and quality of the material content of a proposal. The listed topics under the page limitation include the “Table of Contents including index of any Tables & Drawings.” Since the Table of Contents could be several pages long and it does not contain content in and of itself, Offeror requests that this topic be removed from the page limitation so that offerors have the full 100 pages for Technical Proposal content.

Answer:

See Answer 92 above.

99. **(Section L.16, Technical Proposal Instructions, Specific Instructions, page 62)** The Draft RFP states that the technical proposal must contain a cross-reference table that relates the technical evaluation criteria and sub-criteria sections to proposal page numbers. Is the cross-reference table included in the page limitation?

Recommendation: Do not include the cross-reference table in the 100-page limit.

Answer:

See Answer 92 above.

100. **(Section L.16 (page 62)—Technical Proposal Instructions—Specific Instructions)** “This proposal must be accompanied by a cross-reference table that relates the technical evaluation criteria and sub-criteria to proposal page numbers” Is the cross-reference table included in the page count? We recommend that it be outside of the page count. Regardless of whether this table is in or out of the total page count, we suggest numbering the SOW paragraphs so that they may be referred to easily in a compliance matrix.

Answer:

See Answer 92 above. The Government will clarify the numbering of the SOW in the final RFP.

101. **(Section M.3 Proposal Evaluation Criteria, Criterion 4 - FAR Part 19 Adherence, 1)** In this section the draft RFP states “...as evidenced in the subcontract documents received with the technical proposal....”. Please clarify the submission of subcontract documents. The Offeror recommends that they be attached as an appendix to the Business Proposal and not be included in the Business Proposal page limit.

Answer:

The government will consider this request and clarify the Business Proposal submittal and limitations in the final RFP.

102. **(Section L.16, Page 62, Technical Proposal Instructions, Specific Instructions)** This section states, “The Technical Proposal is limited to 100 pages for topics listed above. In addition, Key Personnel resumes are limited to 2 pages per resume for all designated Key Personnel.” We assume that the two-page resumes are excluded from the 100-page technical proposal limit. We also

assume that the transmittal letter, cover page, table of contents, section dividers, and cross-reference tables are excluded from the 100-page technical proposal page limit. Please clarify.

Answer:

See Answer 92 above.

103. **(Section H.17 “Technical Competence”)** Is J.25 the correct attachment for minimum qualification requirements rather than J.18 as indicated in the draft RFP?

Answer:

The CDC no longer has established minimum qualification requirements.

104. **(Page 58, L.13)** Do we need to give our address again?

Answer:

The address is a government fill in. The final RFP will have that fill in completed.

105. **(H.26- Warranty of Services – Special Provision)** Would the government consider deleting this section?

Answer:

CDC is replacing this provision in favor of more current language but a Year 2000 Warranty provision will remain as part of the solicitation and resulting contract.

106. **(Section J – List of Attachments)** Would the government consider providing the DHHS Small, Disadvantaged, HubZone and Woman-Owned Small Business Subcontracting Plan document referenced as attachment 41?

Answer:

The Final RFP will contain that document.

107. Can we get a copy of the 24 responses to the October 26, 1999 Request for Information Relative to the CDC-Wide Information Technology Support Services Contract?

Answer:

You may request that information through a request under the Freedom of Information Act. However, the responses will be redacted and the requestor will be charged current rates for providing information through the Freedom of Information Act.

108. Can the current contract holder be identified?

Answer:

The current contractors are TRW and HGO.

109. What form do you expect the response to take?

Answer:

Section L “Instructions to Offerors” of the RFP provides information related to the form of the response. The offeror’s clear, concise response should address all of the evaluation criteria.

110. Incorporating the technical proposal into the contract as stated in **Section H-12** provides the possibility of the proposal being released under FOIA. What protection are you offering proposers to guard against this?

Answer:

See Answer 111 below.

111. (**Section H.12**) We question the incorporation of the proposal into the contract by reference. Given that the technical approach is not the most significantly scored factor, and the fact that the number of tasks awarded will cover a wide range of technologies and duties, incorporating the proposal seems less important. In addition, incorporation would make the proposal subject to FOIA.

Answer:

CDC has made the determination that it is important to have the Technical Proposal made a part of the contract by reference. The awardee will be required to redact their Technical Proposal and submit it to CDC for review so that the Contractor’s rights may be protected in the event the Technical Proposal is requested under the Freedom of Information Act.

112. Is the current contract available for review?

Answer:

The current contract is available for review via the Freedom of Information Act.

113. (**Section L.17(6), Page 72, Other Administrative Data**) The draft RFP states that “Your proposal must identify any former DHHS employee to be utilized on this project by providing the individual’s name, when employed by DHHS, where employed, and the capacity in which employed.” Is this requirement irrespective of the dates of employment (e.g., a person employed 20 years ago) and the DHHS organization in which they were employed?

Answer:

Yes.

114. (**Section C.8I Training Facility, page 26 of 39**) Please provide complete listings of all Government Furnished Equipment, and Software (GFE) that are currently provided to the contractor(s) under this requirement.

Answer:

The Government will not provide any equipment for the Training Facility other than that listed in the GFE list.

115. Will CDC provide us with a listing of all Government Furnished Property?

Answer:

Yes, CDC will provide the list of GFE in the final RFP.

116. (**Section H.13 “Government Property”**) Are J.34 and J.36 the correct attachments for the listings of Government Furnished Property rather than J.21 and J.22 as indicated in the draft RFP?

Answer:

The Government will provide a list of Government Furnished Equipment in the final RFP. Attachments to the final RFP will be corrected.

117. **(Section C.8, page 10, paragraph A. Transition and Startup)** In support of transition and phase in, will the Government provide a list of Government Furnished Equipment (GFE)? Will ALL inventory turned over during transition and phase in be considered GFE?

Answer:

All inventory turned over during the transition phase will be considered GFE. Yes.

118. **(Attachment J-34 and J-36)** The draft RFP furnished a list of Government Furnished Equipment and Software (J-36), but does not appear to contain Inventory of CDC-Provided Software (J-34). Is J-34 still a separate attachment, and if so when will it be provided?

Answer:

The Government will provide a list of Government Furnished Equipment in the final RFP.

119. Do we provide equipment or is the equipment purchased on other contracts?

Answer:

The Government will provide a list of Government Furnished Equipment in the final RFP.

120. **Attachment J:** Are the development and support tools currently used for projects that are underway available to the contractor as GFE or will the contractor be required to provide their own toolsets?

Answer:

It depends upon the particular task order. In some cases the Government will provide toolsets. In other cases the contractor will be expected to provide the toolsets. This type of detail will be discussed and addressed after award, at the time task orders are issued.

121. **Section C.9 (g) paragraph 2 Government Provided Resources, page 28 of 39)** “The Government does not contemplate providing the Contractor staff with any equipment, computers, printers, modems, monitors, laptops, etc. for use at the contractor’s employees home. The Contractor shall provide employees the necessary resources to meet their needs if an employee requires use of equipment at home.”

How many current contractor personnel performing on this contract work from home? Is the equipment in their homes Government owned? If so, is it accounted for on the GFE lists?

Answer:

The Government will not provide equipment for the contractor to use at home. The case of a contractor working at home is rare and the contractor will be responsible for providing all required equipment.

122. **(Section L.17, p. 72, Business Proposal Instructions, Other Administrative Data, (8)** The draft RFP states “You must identify all Government-owned property in your possession, and all property acquired from Federal funds to which you have title, that you propose to use in performing the prospective contract.” Please clarify the reference to Government-owned property. This would seem to indicate that there is government property that may be available to the successful offeror. If so, it might be advantageous to include the inventory of such property in the RFP to ensure that all offers are made on the same basis.

Answer:

The Government-owned property referenced in this section refers to property that the contractor has acquired from other contracts that may be used on this contract.

123. **(Section L.11-Indemnification and Medical Liability Insurance, subsection (a))** “The Contractor shall maintain during the term of this contract liability insurance issued by a responsible insurance carrier of not less than the following amount(s) per specialty per occurrence: _____” Would the government consider providing the intended amounts?

Answer:

This clause will not be in the final RFP.

124. **(Section L.11)** requires evidence of insurance documenting the required coverage for each health care provider who will perform under this contract. Because this is an IT contract, we recommend that this FAR clause be deleted.

Answer:

See Answer 123.

125. **(Section C.10, page 31)** The second paragraph discusses the inventory that the Contractor shall maintain. Isn't this a yearly function that he furnishes us?

Answer:

The term “maintain” as used in this context is intended to mean “be responsible for”. It is expected that the contractor will accomplish this in accordance with the requirements of FAR Part 45 and their own property control system.

126. **(Section C.8.F (4), page 21)** We advise that CDC create a separate task and ODC's for maintaining an inventory of spare parts for the repair of CDC provided equipment.

Answer:

See Answer 1.

127. **(Section L.16.5, Key Personnel Resumes: paragraph L.16.5, on page 68)** describes the information to be provided on Key Personnel resumes. There are three labor categories identified as Key Personnel in the Labor Category and Basic Qualifications (Attachment J.25?); however, based on the levels of effort estimated in the B tables, each category will require multiple individuals bid to perform the work. Does the Government want offerors to submit one resume for each Key Personnel labor category (a total of three) or sufficient numbers of resumes to provide the level of effort estimated in B?

Answer:

Key Personnel will be further clarified in the final RFP. However, it is up to each offeror to determine how many of each labor category is sufficient to satisfactorily perform the work. CDC will ensure that in the final RFP the labor categories in level of effort charts are compatible with Key Personnel provisions based on CDC's historical experience with the labor categories. CDC does not want offerors to submit one resume for each labor category unless it is a Key Personnel labor category. In the event the offeror is offering one person for a particular labor category and decides to submit a resume for that person, and that labor category is not Key Personnel, then the resume will be counted in the 100 page limit.

128. In **H.9** “HHSAR 352.270-5 Key Personnel (Apr 1984)”, Program Director and Program Manager are the only two labor categories specified for key personnel. In Section J.25, Labor Category Descriptions and Basic Qualifications, Program Director, Program Manager, and Task Manager are specified as contract key personnel. We suggest that Task Manager be included as a labor category in the H.9 Key Personnel clause. Considering the size, duration, and broad range of technologies in the CITS contract, task managers will play a significant role in ensuring that the workforce supports the mission and objectives of the agency and the CIOs.

Answer:

See Answer 127 above.

129. Section H.9, p.17, Key Personnel Section H.9 identifies two labor categories (Program Director and Program Manager) as key personnel and Section J.25 – Labor Category Descriptions identifies three labor categories as key (Program Director, Program Manager, and Task Manager). We recommend the addition of Task Manager to the list of key personnel in Section H.9 since all three key labor categories in Section J.25 are critical to the delivery of services to the CDC.

Answer:

See Answer 127 above.

130. **(Section H.9, page 17 and Section L.16, page 62)**

Are Task Managers considered key personnel? There appears to be an inconsistency between the two references. Our assumption is that Task Managers are NOT key personnel as stated in Section H.

In Section H.9, Key Personnel, only two categories are listed; Program Director and Program Manager. In Section J, the section under Labor Category Descriptions and Basic Qualifications, there are three key personnel category descriptions listed; Program Director, Program Manager and Task Manager.

Answer:

Task Managers are not considered key personnel. See Answer 127 above.

131. **(Section H.9, Key Personnel, page 17)** Section J lists the Task Manager as contract key personnel, but Section H.9 does not. Please clarify.

Answer:

See Answer 130 above.

132. Please convert the number of hours shown for the categories “Program Director” and “Program Manager” into Full Time Equivalents for the base year. This information will be needed to determine the number of resumes in each category that must be provided in the proposal for “Key Personnel”.

Answer:

Labor category legends in the final RFP will clarify this.

133. The Labor Categories indicate that the Task Manager category is considered “Key Personnel”. This is not consistent with Section H.9 that only shows Program Director and Program Manager. If the Task Manager is considered “Key”, how many resumes are needed in the Proposal for this position?

Answer:

Task Managers are not considered key personnel. See Answer 127 above.

134. **Section H.9** only identifies Program Director and Program Manager as key personnel. However, section **J.25?** (hard to read) identifies the Task Manager also as key personnel. Please clarify.

Answer:

Task Managers are not considered key personnel. See Answer 127 above.

135. **(Section B, Labor Category Descriptions and Basic Qualifications and H.9)** In the labor category descriptions defined in Section B, key personnel are identified as the Program Director, Program Manager, and the Task Manager. However, Section H.9 indicates that only the Program Director and Program Manager are key. Please clarify.

Answer:

Task Managers are not considered key personnel. See Answer 127 above.

136. **(Section H.9, page 17 and Section L.16, page 68)** The Solicitation lists two staff to be named as Key Personnel. May the bidder identify and bid additional management or other staff as Key in the proposal? If so, what is the maximum staff that can be bid as Key?

Answer:

Task Managers are not considered key personnel. See Answer 127 above. Offerors may identify and bid additional management and/or staff as Key Personnel. CDC does not intend to impose a maximum number of Key Personnel.

137. **(Section C.8.B, Page 15, Data Entry and Key-Punching Services)** It appears that CDC wants keypunch pricing to be proposed on estimated keystrokes per type of keypunch service provided; however, the Section B tables appear to allow only Time and Material pricing. Can the CDC clarify how these services are to be proposed and how they should appear in the Section B tables?

Answer:

Keypunching language will not be a part of the final RFP.

138. **Attachment J.27** "Programming Estimated Level of Effort Table for Labor Categories" is not included in the draft RFP even though it is referenced in the list of attachments.

Answer:

This attachment will not be included in the final RFP.

139. Will **Attachment J.28** be updated to reflect the full period of performance and include all of the labor categories listed in J.25?

Answer:

This attachment will not be included in the final RFP.

140. Several labor categories are redundant due to cut and paste from Micro and CISSS (User Support I, II and III). Will these be consolidated or will new categories be defined?

Answer:

Labor categories will be corrected in the final RFP.

141. **(Attachment Section B, Time and Materials Matrix)** When will section J.25 be issued and will the category descriptions correspond with those listed in the section B matrix?

The Time and Materials matrix in section B lists 56 labor categories. DRFP states labor category descriptions are located in section J.25. Section J.25 is not included in solicitation. (Note: preliminary job categories listed in J.18 had only 35 labor category descriptions, discrepancy of 21 labor category descriptions.)

Answer:

Attachment J.25 was included with the draft RFP. The category descriptions will be corrected in the final RFP to correspond with the labor categories listed in the Section B matrix.

142. **(Attachment Section B, Time and Materials Matrix and the Labor Category Descriptions and Basic Qualifications in Section J)** There are Labor Category Descriptions in Section J that are not reflected in the Time and Materials Matrix (for example, numbers 15, 18, 37, 38, 44, 45, 53, 54, 55, 57, 58, 59). Please clarify.

There are multiple labor categories in Section B that have more than one description in the Labor Category Description (for example, User Support Specialist and Network Specialist). Please clarify.

Answer:

The various attachments and RFP references to labor categories will be revised and should be accurate and consistent.

143. The Time and Materials Type Task Order Labor Rate spreadsheet covers 56 job codes, but the estimated hours only cover 15 job codes, please explain.

Answer:

The discrepancies between the Labor Category list and other contract references will be corrected in the final RFP.

144. **Labor Category: Description and Basic Qualifications:** (29) Network Engineer II, (30) Network Engineer I, and (31) Network Specialist. The “network and/LAN” labor category descriptions appear to be written for network support, not for the support of network design and architecting. They do not contain descriptions of the types of tasks and activities with which a network architect would be involved. The skills necessary to plan, design, and implement networks and ensure appropriate network security is built into the application architectures appears to be missing from the descriptions. Will CDC consider re-scoping the network and LAN labor category descriptions to include words (such as those provided below) that focus on providing these skills.

“Knowledge in one or more aspects of telecommunications network architectures for government applications. Possesses broad knowledge in network integration, network interoperability, network implementation, telecommunications technologies, or network protocols.”

Answer:

The nature of the labor categories characterized by (29) Network Engineer II, (30) Network Engineer I, and (31) Network Specialist are intended to be written with a focus of network support at specific levels and are appropriately scoped as described. The requirements for network design and architecture are narrower in focus at these levels and are essentially well defined in terms of planning and design with a basis of studies from CDC IRM/IT committees, standards and explicit directives. For example there is a well-defined commitment to prescribed network protocols, media types, switches and routing throughout CDC for the next two to three years. The guidelines greatly aid and enable these labor categories mentioned above to perform work within a reasonably structured environment while providing leeway for unique situations. High level network design and architectural planning, meaning of a broad effect across CDC, is performed on three to five year cycles and is therefore more likely to be handled through internal CDC IRM resources and/or external consultants because of the infrequent nature and the desire to tie this strategically with CDC’s mission, fundamental relationships to internal organizational structures and requirements, future physical planning, integration to Public and HHS networks, disaster recovery and security.

145. **Labor Category: Description and Basic Qualifications:** (9) Computer Programmer III, (10) Computer Programmer II, (11) Computer Programmer I, (17) Database Specialist II, (18) Database Specialist I, (36) Systems Analyst III, (37) Systems Analyst II, (38) Systems Analyst I, (39) Systems Engineer II, (40) Systems Engineer I, (41) Systems Programmer III, (42) Systems Programmer II, and (43) Systems Programmer I. A number of the “programming” labor category descriptions appear to be written for a network support contract and/or for a main frame support contract. They do not contain descriptions of the types of tasks and activities with which a web developer and/or a client-server developer would be involved. The tools and software identified do not appear to reflect current development suites, such as SilverStream, ASP, Oracle, etc. Will CDC consider re-scoping several labor category descriptions to reflect the development suites currently being applied at CDC and in the health community? We suggest that words such as the following be added to assure that CDC obtain the skills needed to accomplish the work required:

“Works with one or more of the following: SQL, third/fourth generation languages, HyperText Markup Language (HTML), HyperText Transfer Protocol (HTTP), and Common Gateway Interface (CGI), SML/XML, SilverStream, ColdFusion, ASP, Oracle, FrontPage, and Netscape software in the design and implementation of systems and uses database management systems. Analyzes and studies complex information system requirements. Designs software tools and subsystems to support software reuse and do main analyses and manages their implementation. Analyzes and develops internet/intranet application software processes. Designs, codes, installs, and maintains appropriate systems software programs. Supports the identification, evaluation, customization, and implementation of offeror-supplied software packages. Trains users in applications programming and in the use of systems software and related hardware.”

Answer:

Labor category descriptions will be modified in the final RFP to reflect CDC’s environment. Task Orders will be issued with necessary skill sets.

146. **(Section J, Labor Category Descriptions and Basic Qualifications)** The labor category descriptions and qualifications are vague regarding specifics such as minimum levels of education or years of experience required. This would make it difficult to compare resumes from different offerors, as different offerors could submit differing ranges of education and experience for the same position description. This offeror recommends requiring more specific standards for all offerors to meet in their proposed personnel.

Answer:

The Government chooses to refrain from listing minimum qualifications so as to allow the Contractor maximum flexibility in adequately staffing positions. The quid pro quo for allowing this flexibility, of course, is to insist that the Contractor provide experienced and competent people. The intent is to place responsibility for adequate and proper staffing to the Contractor. The Government reserves the right to agree or disagree with the Contractor’s selections on a case by case basis.

147. **Labor Categories #17 and #18**, Database Specialist II and I. The labor categories “Database Specialist II and I” (numbers 17 and 18, respectively) contain the same description with the exception of adding the words “impact on user expectations” to the Database Specialist I category. Should the descriptions provide for a more complex set of requirements for the Database Specialist II compared with the Database Specialist I?

Answer:

The labor category descriptions will be modified in the final RFP to show distinct differences between these 2 categories.

148. **Labor Category #44**, Technical Automation Specialist. Please clarify the difference between this labor category and the Computer Programmer labor category.

Answer:

IRMO will review this answer.

CDC feels the current labor category descriptions are accurate.

149. **Labor Category # 45**, Technical Information Specialist. Is this labor category a research assistant?

Answer:

IRMO will review this answer.

CDC feels the current labor category descriptions are accurate.

150. **Labor Category #46**, Technical Writer/Documentation Specialist. Will the Technical Writer/Documentation Specialist proofread and edit documents?

Answer:

IRMO will review this answer.

CDC feels the current labor category descriptions are accurate.

151. The Labor Category Descriptions in **Attachment J.25** do not provide for years of experience required or degrees needed, if applicable. This data is critical to properly pricing these categories. For example, there is no difference in the description of a Database Specialist II and a Database Specialist I. When providing this data, if education can be substituted for experience or vice-versus, please provide metrics for this substitution. If the Government will not provide this data, what metrics will be used to “approve” resumes for these categories – just that the individual has previously held responsibilities consistent with the definitions?

Answer:

See answer 146 above.

152. **Labor Category: Description and Basic Qualifications.** It has been our experience that the government is better assured of receiving the quality and level of skills needed to accomplish complex technical tasks when labor category qualifications state requirements for specific certifications (e.g., certified network engineer, Microsoft certified engineer, etc.). Will CDC require such certifications for appropriate labor categories? (Note that sample requirements for such certifications are included in the labor category descriptions provided in Appendix A.) If yes, how will CDC evaluate cost realism for those categories that require such certifications because our experience shows that such certifications increase the labor rates for those categories?

Answer:

See answer 146 above.

153. **(Section B, Attachment J-1)** The tables contained in Section B contain the total estimated LOE by labor category for each year of the contract. Will the Government provide a split of hours between the core (CPFF) and additional task order (T&M/FFP) requirements for the purposes of evaluation?

Recommendation: It appears that the Government would use these loaded labor rates for T&M or FFP type task orders only. Since the vast majority of the work envisioned under the CITS program (core tasks) would be evaluated on a CPFF basis, recommend that the Government state a specific distribution between CPFF and T&M/FFP (i.e., 70% CPFF, 30% T&M/FFP). This would level the playing field across all offerors without increasing the total number of hours under evaluation and more accurately estimate the Government’s total cost.

Answer:

Yes. The final RFP will reflect what CDC believes to be the level of effort, in terms of estimated hours, for both cost plus fixed fee time and materials and firm fixed priced-type task orders.

154. **Labor Category #4, ADP Security Specialist.** Are there any required certifications or security clearances required for this or any other labor category? For example, CDC can require the contractor to conduct a Georgia Background Investigation check for contract employees prior to contract assignment.

Answer:

Bidders are directed to RFP sections: Security Clearance Requirements (July 1999) and Automated Information Systems Security Requirements. Also please see attachments on ADP Security Policy; Information Security Policy; and CDC / ATSDR Security Standards for Novell File Servers for further information regarding security requirements. The attachments will be included in the final RFP.

155. How many and which of the labor categories listed in **Section B**, if any, are considered to be Service Contract Act Wage Determination (WD) labor categories?

Answer:

In pre-award your firm makes the determination as to which labor categories are Service Contract Act labor categories in accordance with the Fair Labor Standards Act definitions for professional, administrative, and clerical positions. If an offeror makes the determination that all labor categories required in this contract meet the definitions for exclusion of the Service Contract Act, then the offeror will complete the exemption provision in Section K of the RFP. CDC will evaluate the offer to insure that all labor categories meet the minimum wages and benefits required by the Service Contract Act Wage Determinations applicable to the labor category(ies) in the geographic location where the work is proposed. Regardless of how many labor categories are proposed as Service Contract Act employees, CDC has determined that the work performed under this contract is Service Contract Act type work. Offerors who do not propose to pay at least the minimums required by the Service Contract Act for the labor categories will be considered a higher risk.

156. Is this project an attempt to divest CDC of IT staff per the 1998 FAIR Act?

Answer:

No Government employees will be displaced as a result of this contract.

157. **(Section H.20 “Observance of Legal Holidays (Contractor Facilities)** If prior approval is received from the Government, may an alternate date be substituted if an employee is able to accomplish bona fide work at the Contractor’s facility on a designated holiday?

Answer:

Yes; however bona fide work must be absolutely established prior to the holiday and compliance with the Fair Labor Standard Act be met.

158. **Section J, Contractor Service Response Requirements, Service Level Measurements (Section B.2.a – Video Conferencing Support Calls):** What support hours are required in this specific area?

Answer:

Video Conferencing Support will not be a part of these contracts.

159. Are there a minimum number of hours associated with this “as-needed” contract?

Answer:

The Government is unclear about the meaning and intent of this question because there is no specific reference to a Section within the RFP. Attachments have been provided to give bidders an expectation of the Government’s best estimate of anticipated task order hours that will be issued under the upcoming contract.

160. Can an offeror propose fewer hours than those listed in **Section B**?

Answer:

No. Section B is intended to provide bidders with an ESTIMATE of the number of hours by year and by labor category for anticipated work under the contract.

161. **(Attachment J)** Are the hours provided in the various J attachments (such as J.27 and J.28) historical data or are they estimates provided by CDC on which we must base our proposal? If they are to be used for developing our proposal it is requested that the Government provide a full depiction of the labor hours to be proposed, by functional area, by geographic location.

Answer:

The final RFP will be more comprehensive relative to the levels of effort. In addition, the levels of effort are based upon historical documentation as well as projections for work over the life of the contract.

162. **(Section F.2, Page 7, Period of Performance (Task/Delivery Order Contracts) (Jul 1999)** “Contract: The period of performance is anticipated to be a base period of performance of nine months, beginning on or about October 5, 2001, and ending on June 30, 2002. Thereafter, the Government anticipates six 12-calendar month optional periods and one final option period, which begins on or about July 1, 2008, and ends on or about September 28, 2008, so that the full term of the contract does not exceed 84 months.”

Distribution of hours by labor category (Section B) are not provided for the final option period, which begins on or about July 1, 2008. Are we to assume ¼ of option period 6 hours? Please clarify.

Answer:

The final RFP will reflect what CDC believes will be levels of effort for all option periods of the contract.

163. **(Section B)** The table shows 3876 hours for the Program Director in the first year of the contract, with the number of hours per year escalating to 4378 hours in the sixth option year. Our understanding is that CDC wants one individual to be bid in the Program Director category. Since a work year is typically defined as 2080, 1920, or 1880 hours, this appears to be an error. Based on other categories that appear to require single individuals, it appears that CDC is using 2080 hours as work year hours for an individual. Should the yearly hour estimate for the Program Director also be 2080 for all contract years?

Answer:

The final RFP will reflect hours based on a Government work year of 2080. In the instance that more than 2080 hours are stated in any labor category, offerors must assume that more than one person is established in the labor category. CDC will correct Program Director labor hours to reflect the number of hours for one Program Director for all periods of performance in the final RFP.

164. Projected manpower is 350 to 400 employees; can offerors propose other methods of completing the job while reducing cost?

Answer:

The Government is unclear as to your statement “Projected manpower is 350 to 400 employees”. The Government explicitly refrains from providing personnel projections in the RFP. We are always willing to receive Contractor suggestions for performance at reduced costs so long as the requirements of the solicitation and contract are met. If you anticipate providing CDC with an Alternate Proposal, see the Section in the final RFP entitled Alternate Proposals to insure you provide proposals appropriately.

165. What is the basis for the 2% escalation in labor hours in each option period? Current experience suggests growth at a higher rate than 2%.

Answer:

CDC is comfortable with our estimated projections. Offerors should propose based on levels of effort shown in the Section B tables in the final RFP.

166. **(Attachment Section B, Time and Materials Matrix and page 69, Section L.17 Business Proposal Instructions)** Is the Labor Category matrix for the Base Year based on a nine-month time period? In comparing these numbers with the Option Years it appears that this Base Year matrix reflects a twelve-month period instead of a nine-month period. The hours for the Base Year equal a full person-year. Please clarify the intent of the Section B hours or correct the period of performance.

Answer:

The final RFP will reflect what CDC believes will be levels of effort for all periods of performance of the contract.

167. Please clarify the relationship between Attachments **J.1, J.25, and J.28**. There appears to be a lack of correlation between the attachments. For example, J.1 includes 56,160 hours of a LAN Administrator I and J.28 includes 40,560 hours of a LAN Administrator. In addition, attachment J.25 includes a labor category for LAN Administrator Team Leader and LAN Administrator while attachment J.1 uses the labor categories LAN Administrator I and II.

Answer:

The Government recognizes that there are discrepancies in the details shown on the attachments to the draft RFP. These will be clarified with the issuance of the final RFP. Thank you for pointing out these errors so that appropriate corrections can be made.

168. Why is the base period for one FTE at 2080? Are deliverable hours more reasonably 1850 – 1900 hours per year?

Answer:

The Federal Government work-year is 2080 hours inclusive of all types of leave.

169. **(Sections H.20 and H.21)** Does Government Administrative leave only apply to persons performing at Government Facilities? If an individual is working on a T&M task, are they to charge this time to the task or to an overhead account? Does payment for administrative leave apply to both exempt and non-exempt classified employees?

Answer:

Yes. Charged to the overhead account. Yes.

170. **Section B: (table, base & option periods) Time and Materials Type Task Order, Loaded Labor Rate**
Does this table include the labor categories and hours for Cincinnati and Morgantown (currently _____)?

Answer:

Yes. The final RFP will have a better depiction of the hours for the various locations. Also, see Answer 1.

171. Do we have to pay prevailing wages for each of the eleven states, W.DC & PR?

Answer:

Offerors must pay at least the minimum wages as stated in the Service Contract Act Wage Determinations for every location that has a Wage Determination. Regardless of the location of the performance of the work, the Contractor is required to be in full compliance with the Act itself at all times.

172. Will there be on-site and off-site rates?

Answer:

That is totally dependent on the offeror's cost accounting systems.

173. **(Attachment J – Staffing Profile Estimates by Geographic Location and Onsite/Offsite Location)**

Please clarify? Where are the facility cost estimates to be proposed since there is no recognition of differences for Onsite/Offsite prices contained in Schedule B? If they are to be included in the loaded labor rates, what provision will be made for the resultant cost differential brought about by the changes on onsite/offsite mix as anticipated in the Attachment J note?

This attachment estimates the percentages of Onsite/Offsite work by location. The note indicates that the estimates should be used for proposal development purposes only and that as labor hours increase over the course of the contract life, a larger percentage of work will likely occur offsite (contractor site).

Answer:

On-site and off-site rates are dependent on company's Cost Accounting system. Also, the final RFP will have a comprehensive Section B which will provide adequate information to complete pricing information.

174. **(Section B, T&M Task Orders Loaded Labor Rates)** Will Section B, in the final RFP, have separate tables for on- and off-site rates? Also, it appears that, in the electronic copy, the hours do not add up to the total shown in Section B tables. Please clarify the correct number of hours for Section B. Also, we recommend that the Government release the complete format of Section B before the release of the final RFP for Contractor review and comment.

Answer:

No. The final RFP will reflect CDC's best estimate on the number of estimated hours for each labor category. CDC will furnish Section B of the final RFP with the final RFP package and not before.

175. **(Section L.17 Business Proposal Instructions, page 68)** The use of uncompensated overtime or mandatory workweeks greater than 40 hours is detrimental to employee performance, contributing to higher than usual employee turnover and higher overall cost to the Government. Further, as a bidding strategy, uncompensated overtime or mandatory workweeks greater than 40 hours, artificially lowers estimated cost, is unrealistic and requires CDC to determine what levels are reasonable. For evaluation purposes, we recommend that CDC evaluate all bidders based on a 40-hour workweek and not allow inclusion of uncompensated overtime or mandatory workweeks in excess of 40 hours, and we ask that CDC provide greater detail as to how uncompensated overtime will be evaluated relative to FAR Clause 52.222-46 which is contained in Section L.17.C.1.

Answer:

CDC will not mandate how offerors propose as long as the proposal is in compliance with the offeror's accounting system. However, in performing cost realism, the government will convert the offeror's proposed man year to a government man year of 2080 hours.

176. **Section L.17, p. 70-71, Business Proposal Instructions, Identification of Uncompensated Overtime (January 1992)** The draft RFP states, "*Offers must be priced based on a 40-hour work week for all personnel proposed to perform as direct charge to the contract.*" The draft RFP also has the requirement to follow the Standard Form 1411 format and the potential for submission of cost and pricing data. Therefore we request that this sentence be removed and that Offerors follow their disclosed standard practices for all pricing. If the referenced sentence is not removed and submitting companies are not disclosed with a 40-hour work week submission of multiple sets of 1411 data and associated text will be required.

Answer:

Yes. That requirement will be removed. Also the 1411 is obsolete. The final RFP will not have a reference to a SF 1411.

177. **Section L.17, p. 71, Business Proposal Instructions, Identification of Uncompensated Overtime (January 1992)** The draft RFP states, "*Any Offeror proposing uncompensated overtime, must separately identify for the prime and any proposed subcontractor(s) using the labor charts in Attachment J.27, by labor, category, the number of compensated hours, the number of uncompensated overtime hours, and the resultant uncompensated overtime labor rate proposed.*" Uncompensated overtime practices are considered proprietary information. We request that uncompensated overtime information be submitted individually by each company (i.e. identified by the prime in the prime's Business Proposal and identified in sealed packages by each subcontractor), rather than all in the prime's Business Proposal.

Answer:

That is indeed how it would be done. CDC ordinarily receives independent subcontractor proprietary data as appropriate directly from subcontractors.

178. **(Section L.17, p. 71, Business Proposal Instructions, Identification of Uncompensated Overtime (January 1992)** The draft RFP states, "*Any Offeror proposing uncompensated overtime, must separately identify for the prime and any proposed subcontractor(s) using the labor charts in Attachment J.27, by labor, category, the number of compensated hours, the number of*

uncompensated overtime hours, and the resultant uncompensated overtime labor rate proposed.” Please clarify the reference to Attachment J.27 and requested information. Offeror suggests that specific identifiers be included on attached charts and tables for better identification of the requirement.

Answer:

Attachment J.27 is not a part of the final RFP. Therefore, that reference will no longer apply. Section B will be the location where programming service hours by labor category for all pertinent locations will be shown. Also, see Answer 178 above. The CDC wants to see which labor categories, how many hours and the rates used for those labor categories which are proposed for more than a 40-hour work week.

179. Does the Government plan to address uncompensated overtime or the expected number of productive labor hours per year in the more detailed instructions to offerors for the cost proposal? Please clarify what CDC considers the number of productive hours in a fiscal year (2080 or some other figure?). Based on the figure provided, are we to assume that nominal hours over these figures (e.g., 2122 being 42 hours over 2080) would be considered “overtime” hours or should these be priced at “straight time”? Also, will different labor rates be required for contractor site and Government site?

Answer:

No. CDC means a 2080 man-year when it refers to productive hours in a fiscal year. Hours over 40 hours per work week are considered overtime when using uncompensated overtime. Different on site and off site rates are not required by CDC..

180. **(Section B, Attachment J-1)** The tables contained in this section provide a format for offerors to include loaded labor rates for each of the labor categories for each year of the contract. Our assumption is that these loaded labor rates would be a composite of the prime contractor’s and each of the teammates’ fully loaded labor rates. Is this assumption correct? Additionally, to what geographic region would these rates apply?

Recommendation: The Government should specifically state that offerors should complete these tables with a single composite rate per labor category for each period of the contract using a weighted average based on reasonable expected utilization. Additionally, the Government should request that offerors provide fully loaded hourly rates for contractor-site and Government-site rates covering the Atlanta area only.

Rationale: This question has significant implications for both the production and evaluation of offerors’ business proposals. With both CPFF and T&M elements under evaluation, each offeror’s business proposal will be quite lengthy, almost assuredly exceeding the 200 page limitation (see Part V comments below). The Government may be able to limit the amount of cost and pricing data under evaluation by requiring offerors to provide T&M rates for the Atlanta region only. Rates for other geographic locations could be negotiated on a case-by-case, task order-by-task order basis after award. The risk of incurring additional administrative delay after award negotiating task orders is limited since the vast majority of the CITS program will be administered on a cost-reimbursable basis. The Government would only need to negotiate fair and reasonable prices for T&M task orders outside the Atlanta area on an as-needed basis.

This approach will greatly reduce the amount of effort expended evaluating all offerors’ initial business proposals, and almost certainly offset any administrative time incurred with the one successful offeror after award (i.e., 80% of the effort on 20% of the requirements). For each geographic location offerors are required to submit a T&M rate schedule, the Government would need to conduct a fair and reasonable price analysis, including composite methodology, on 784 labor rates (56 labor categories x 2 (on/off-sites) x 7 years). This calculation does not include the individual evaluation required for the prime and subcontractors’ prices used in the composite methodology, which could easily approach 4,000 individual rates for an offeror with only four subcontractors. In fact, we have participated in similar acquisitions in which the business volume(s) have exceeded 1,000 pages or more.

Answer:

The final RFP will establish a Section B that depicts estimated levels of effort for geographic locations. The Government will accept a proposal which includes subcontractor rates and/or prime contractor rates as a composite. Business Proposals however, must clearly back up any method a prime uses to complete the pricing required in the final RFP. The Government clearly has stated that the contract document itself will be a cost plus fixed fee type contract and CDC will evaluate proposals on that basis. Pricing Section B for time and materials and firm fixed price and the back up information required for those prices will be reviewed because those prices will become part of the contract for use in task orders and CDC must have a firm basis to make a fair and reasonable determination.

181. Regarding **Attachment J.30**, is it correct to assume that the geographic location (and onsite/offsite) profiles have not been modified to include the “microcomputer support” and “programming services” labor?

Answer:

This document will be revised in the final RFP. Also, see Answer 1.

182. Since the only expenses incurred in year 7 appear to be for travel and training, will labor rates be required?

Answer:

The final RFP will include labor for the last period of performance.

183. (**Sections I.9 and I.10**) address the Service Contract Act. If area wage determinations are to be used, which areas will be used? Will this require separate pricing by different geographical locations?

Answer:

Department of Labor wage determinations will be included in the final RFP. Offerors will decide the best way to propose; however, when a geographic area has an applicable wage determination, offerors who do not propose at least the minimum hourly rate and fringe benefits called for in the wage determination will be placed in a higher risk category and CDC will correct that aspect of the proposal in the cost realism analysis.

184. Is the current work force transferable to the awarded company? See page 11.

Answer:

The Government has historically encouraged and supported the transition of incumbent personnel to assure the best possible continuity of service. It must be pointed out however, that selection of appropriate personnel is at the sole discretion of the incoming Contractor so long as those personnel otherwise meet stated requirements.

185. (**Section C.8.A, p. 11 of 39, Transition and Startup**) The draft RFP states, “To allow maximum retention of corporate memory of incumbent personnel, the Government may, at transition, grandfather those personnel into positions for which they do not meet the requirements stated in Section C of this contract.” Can the Government clarify which specific requirements in Section C are being referenced? Is the Government referring to the qualifications for each labor category in Section J.25 – Labor Category Descriptions and Basic Qualifications?

Answer:

No, CDC cannot at this time clarify which specific requirements in Section C are being referenced. Even though the CDC no longer has minimum education and experience requirements, the Government wishes to retain its right to exercise its discretion to retain personnel with corporate knowledge on a case-by-case basis.

186. (**Section F.4, Place(s) of Performance (Jul 99)**) Was it the intent of the Government to reference Section J.7 – Places of Performance and not Section J.3 – IRMO Strategic Plan?

Answer:

The Government’s intent was to reference Section J.7, Places of Performance. This will be corrected in the final RFP.

187. (**Section C.8.B, Item 27**) Do IT facility operations only include CDC’s headquarters in Atlanta? If not, what and how are other facilities currently managed? Remotely or on-site?

Answer:

The IT facilities operations (mounting and dismounting of tapes, batch job submission, etc) referred to in Section C.8.B Item 26, only include CDC's headquarters in Atlanta.

188. **(Section C.8, page 9, third paragraph)** mentions "Support shall also be provided on a per diem, as needed basis to users of CDC or authorized state health agencies... in Attachment J.XX. Where is that attachment?

Also, do we need to mention how much work historically is for the state health agencies or in other countries. Should we list the countries? We mention "CDC has field offices throughout the world..." on page 10. Do we need to tell them where they are or perhaps how much work this is.

Answer:

The attachment referred to is the Places of Performance attachment. That attachment will be numbered in the final RFP. The Places of Performance attachment will only list the CDC offices in the United States. Historically, we have only experienced 4-5 overseas trips per year each lasting less than 30 days.

189. **J.29** lists Key punching Quantities Does these quantities include Cincinnati and Morgantown. I know on the Morgantown contract that there is key punching.

Answer:

Key punching language will be removed from the final RFP insofar as the CDC-wide portion of the contract. If NIOSH has key punching activities, those estimates will appear in the final RFP for NIOSH.

190. **J.30** lists staffing profile estimates by Geographic Location. Do we need to include Cincinnati and Morgantown? What does other mean?

Answer:

This attachment will be updated in the final RFP. The term "other" will be removed. Also, see Answer 1.

191. **(Attachment I - Staffing Profile Estimates by Geographic Location and Onsite/Offsite Location)** Is it accurate to assume that the tasking of facility requirements will be issued through a cost reimbursable task order? If not, will the government allow for equitable adjustments based on differences between RFP offsite percentages, work locations and level of effort and actual experience?

Answer:

The Government anticipates issuing a management task order that will include facilities, if necessary. CDC anticipates that this task order will be a cost type task order.

192. **(Attachment J—Staffing Profile Estimates by Geographic Location and On-Site/Off-Site Location, Attachment J.30)** The staffing profile indicates that 15% of the total hours to be estimated for evaluation purposes occur in a location "Other." For pricing purposes, will the Government please specify a location for "Other?" Recommendation: In order to ensure accurate estimation, level playing field for evaluation, allocation/distribution of hours among teammates, and regulatory compliance with approved cost estimating standards, the Government should specify a location for "Other." Recommend that these hours simply be included under the category "Atlanta" for the purposes of evaluation. Note: if the Government selects an alternate location not already contained in the Attachment, a separate wage determination will need to be requested of the Department of Labor.

Answer:

CDC will provide additional information in Section B of the final RFP.

193. **(Section L.16 “Technical Proposal Instructions, Historical Metrics”)** requests in the first paragraph that statistics be provided for the last three years for the requested metrics. Metrics 2 (training) and 3 (turnover rate) specify two years. Please clarify this difference.

Answer:

The final RFP will reflect three years.

194. **(Section L.15, Oral Presentation Instructions, page 60)** Will the Contractor be allowed to furnish their own presentation equipment? If not, please provide the make and model of the equipment to be provided by CDC and the software titles and versions that will be on the machines to be used.

Answer:

The offeror will be allowed to bring presentation equipment. The Instructions to Oral Presenters will be sent to those offerors in the competitive range and will provide the make and model number of the video projector that will be provided for offeror use during the presentation. In addition, CDC will provide an overhead transparency projector for offeror use.

195. **(Section L.15 “Oral Presentation Instructions”)** requires “all proposed Key Personnel of the prime contractor and the senior most proposed member of the subcontractors...participate in the presentation.” Please clarify “participate.” Does the Government expect all proposed Key Personnel and the senior most proposed member of the sub contractors to present during the orals or does “participate” simply mean that the above personnel attend the oral presentation?

Answer:

CDC expects key personnel to conduct the oral presentation. It is up to the offeror to determine what part each of the key personnel will have. The government’s intention is to determine the key personnel’s familiarity with the proposal and their ability to communicate.

196. **(Section L.15, Oral Presentation Instructions, page 61)** It is requested that CDC allow an executive-level manager of the prime contractor’s company, not designated as key, in the room to participate in the question/answer session.

Answer:

The offeror’s oral presentation team may include individuals other than those designated as key personnel. CDC does not expect that these individuals will not have a major role in the presentation but will be able to answer questions specific to their area of expertise.

197. **(Section L.15)** The Oral Presentation may only include members of the “proposed staff”. May the offeror bring personnel who are covered under “Overhead and G&A costs” who would not be directly billable to the contract to participate in the presentation?

Answer:

See Answer 196.

198. **(Section L.15)** From our reading of the draft RFP, it is unclear at what point in the procurement process oral presentation materials are required. Please clarify. We recommend that copies of oral presentation materials only be required from contractors that the Government has determined to be in the competitive range.

Answer:

The final RFP will state that oral presentation materials will only be required from those offerors in the competitive range and when oral presentation materials will be delivered to the government.

199. **(Section L.15 Oral Presentation Instructions)** The state draft says “The government believes that sufficient lead time for notification of oral presentations is 10 calendar days. From the date of receipt by offerors via written or electronic notification by the contracting office of oral presentations, offerors shall have 24 hours to confirm the date and time selected.” This process is not uniform in distribution, i.e.: written or electronic but one way for all offerors. Also 10 calendar days rather than working days could have receipt on a non-business weekend day resulting in an inability to properly respond to the 24 hour notification requirement. Clarification would be appreciated.

Answer:

The government will send a facsimile and/or electronic transmission to each offeror in the competitive range to establish a date, time and place for oral presentations. Offerors will then have 24 hours from receipt of that facsimile to confirm, either by return facsimile or email, the date and time selected by the Contracting Officer. The government’s assigned dates will allow each offeror 10 calendar days for preparation time between the time of notification the oral presentation date selected. Facsimile and electronic transmission information submitted to the government by the offeror must have a 7-day, 24-hour receiving capability as will the government for receiving return confirmations.

200. **(Section L.14 and L.15: paragraphs L.14 and L.15, beginning on page 59)** discuss the oral presentation portion of the proposal. Are we correct in our assumption that no presentation materials will be provided to the Government until the scheduled time for each offeror’s oral presentation? This would allow additional preparation time to offerors that are scheduled later in the process. Would it not be more equitable to give all offerors the same time for preparation by requiring submission at some time prior to the first scheduled presentation?

Answer:

The government’s intention is to revise the final RFP so that each offeror in the competitive range will have an equal amount of time for preparation of oral presentations and materials. Also, see Answer 199.

201. **(Section L.14, p. 59, Proposal Format and Section L.15, p. 59, Oral Presentation Instructions)** Please clarify when the Oral Presentation Materials are to be submitted to the Government. Section L.14 states that the Oral Presentation Materials are to be submitted at the time of submission of the written Technical and Business proposals. Section L.15 states that the Oral Presentation Material is submitted after submission of the initial proposal information on the day and time of the presentation, prior to introductions. Submission of Oral Presentation Materials as stated in Section L.15 is recommended to help streamline the procurement process.

Answer:

See Answer 199.

202. **(Sections L.14 and L.15)** Please clarify - Are the Oral Presentation materials to be submitted at the same time as the Technical and Business Proposals or only on the day of the presentation? Is the term “written associated Oral Presentation Materials” referencing other materials than the slides to be used in the Oral Presentation?

Answer:

The submission of oral presentation materials will not be required at the same time as the Technical and Business proposals. They will be required not earlier than on the date of oral presentations. The government will revise the final RFP so that it will be clearly stated. The term written associated oral presentation materials does not mean any materials other than those directly associated with the oral presentation itself.

203. **(Section L.15)** appears to conflict with section M.3. M.3 states that oral presentations will be part of the technical proposal yet L.15 indicates that a selection could be made without oral presentations. Please clarify.

Answer:

The final RFP will be revised so that Section L and M are clearly stated.

204. **(Section L.14, Proposal Format, page 59 and L. 15 Oral Presentation Instructions, page 60)** Section L. 14 states that “All Offerors shall be required to submit their proposals in three (3) distinct parts: (1) written associated Oral Presentation Materials, (2) written Technical Proposal, and (3) written Business Proposal.” Further, the section states that “an original and 9 copies of your associated Oral Presentation Materials, Technical Proposal...” be submitted. This implies Oral Presentation Materials are to be submitted at the same time the Cost and Technical proposals are due. However, Section L.15 states that “Nine (9) copies of all presentation materials, other than those heretofore described in other locations of the RFP, must be provided to the Contracting Officer not earlier or later than on the day and time of the presentation. Are Oral Presentation Materials due with the Technical and Cost Proposal submission?

Recommendation: Per Draft RFP Section L.15, require submission of the Oral Presentation Materials on the day and time of the presentation.

Rationale: The CDC CITS proposal effort must include the involvement of key people who will perform the work associated with the CITS contract. To require the concurrent development of two major documents would dilute the intensity and value of the entire proposal preparation process. This would not be in the best interest of the Government. Rather, we ask that you allow Offerors to first focus on the preparation of a fully compliant and thoughtful proposal. The Oral Presentation Materials should and must support, enhance, and clarify the key elements of the Technical Proposal. Hence, their presentation is a natural follow-on, not a concurrent activity. From an industry perspective, we view the development of oral presentations as a secondary proposal effort deserving of the same level of attention and preparation.

Answer:

Only offerors in the competitive range will be asked to make oral presentations. The submission of oral presentation materials will not be required at the same time as the Technical and Business proposals. The government’s intention is to revise the final RFP so that it is clearly stated as well as the fact that each offeror in the competitive range will have an equal amount of time for preparation of oral presentations and materials. Also, see Answer 199.

205. **(Section L12 FAR 52.244-2, Page 32, Subcontracts (Aug 1998))** If the prime contractor will be required to submit certified cost or pricing data, can we assume CDC will perform audits of any subcontractor whose proposal exceeds the cost or pricing data dollar threshold?

Answer:

Yes. CDC will either perform them or request audits from DCAA.

206. **(Section C, page 38 “Reporting Requirements”)** Is this a new requirement?

Answer:

The Government is unclear about the reference to a “new requirement”. The requirement was in the RFP which resulted in the current CISSS contract.

207. **(Section C.20(c) page 37 of 39)** The Contractor shall provide an online reporting system accessible to the Contracting Officer, Co-Project Officers, and Technical Monitors, as needed. Does this on-line system need to be real-time or may contract data be posted to an accessible system daily?

Answer:

The required online reporting system does not need to be "real-time". It is acceptable for contract data to be posted to an accessible system daily.

208. **(Section G.15 SDB Participation Targets and Reporting, page 12)** The Contractor shall notify the Contracting Officer in writing of any substitutions. Given the requirements for notification to the contracting officer under FAR 52.244-2 for consent to subcontract, and given the requirements in the above referenced clause, would the Government consider a single consolidated submittal that meets the requirement for both actions, rather than two separate submittals?

Answer:

No.

209. The draft RFP indicates (**pages 11 and 26 of 39**) that there will be two designated project officers from the Information Resource Management Office (IRMO). It would be helpful in developing our management approach and plan if the roles and responsibilities of these two individuals are more clearly defined, especially how they will relate to each other regarding their roles and responsibilities.

Answer:

There will be no differentiation in the roles and responsibilities of the two IRMO Project Officers. The relationship should be considered as two people equally sharing the duties of the one position.

210. Please clarify roles of various technical personnel in section **G.10**. Confused as to who contractor would receive technical direction from; can more than one person give technical direction for the same task?

Answer:

See the last paragraph of Section C18 in the draft RFP.

211. (**Section J.25**) The role of the program director is clear, but please clarify the distinctions between the program manager and the task manager labor categories.

Answer:

CDC feels this is adequately addressed in the draft RFP. The Key Personnel designation will be removed from the Task Manager description.

212. (**Section C.8 (A) “Transition and Start-up”**) states the transition period will be 90 days. Section F begins by showing the Performance Start Date as 10/05/01. Is the transition to begin 90 days BEFORE this date or on this date?

Answer:

The beginning of the transition period coincides with the date the government signs the contract.

213. (**Section C.6, page 8**) We recommend that CDC elaborate on what constitutes a “timely fashion” for the contractor to respond to a new requirement before “CDC may seek alternative means to meet its requirement”. Will this time period be fixed or negotiated with each new task?

Answer:

The Government’s intent is that the statement “timely fashion” will not be expressly defined. The Government reserves its right to make a judgement call, on a case by case basis, as to what constitutes “timely”.

214. **Section J, Contractor Service Response Requirements, Service Level Measurements (Section B.2.c (Software-Related Calls):** How firm is the resolution time? For example, if a problem resolution requires software deployment, 8 to 16 hours may not be practical in all cases.

Answer:

Based on historical experience, it is considered reasonable for CDC to expect resolution of more than 95% of all software related calls within a 16 hour period.

215. **(Section J., Attachment J.8.B.2.b.& c, Contractor Service Response Requirements Service Level Measurements)** The draft RFP states, "Response, Resolution/Repair time is based on work-hours." Please clarify the reference to "work-hours" and provide a definition of the start and end time, for example 7am to 6pm EST.

Answer:

See Answer 1. Maintenance and Repair of computers will not be in the scope of work of the final RFP.

216. **(Section C.9(d), p. 27 of 39, Organizational/Administrative Consideration, Contractor's Meetings)** The draft RFP states, "Contractor required staff or special meetings shall be scheduled at least ten business days in advance and a written notification provided seven business days in advance, to the Project Officers and Technical Monitors of the date, time, and if appropriate, purpose of the meeting." While it is understood that a lapse in service resulting from participation in meetings is the Government's primary concern, is there a threshold for the number of contractor staff involved or a meeting duration in which this clause would apply?

Answer:

The Contractor is correct in assuming that the Government is concerned about a lapse in service resulting from meeting participation by the Contractor's staff. The Government's intent in this requirement is to encourage open communications so that any potential service disruptions are mitigated. The Government has no particular threshold in mind as long as the intent of the requirement is adhered to.

217. **(Section C.11, page 31)** CDC allows for a three-hour general orientation to the Contractor's staff of CDC's computing environment within 60 days of contract award. We believe it should be conducted within a 30 day time period.

Answer:

The Government appreciates the Contractor's concerns that staff is quickly brought up to speed on the CDC computing environment. Every effort will be made to perform the orientation as soon as practical after contract award. However the logistics involved with accomplishing this task are sufficiently significant that the Government wishes to leave the wording of this Section unchanged.

218. **(Section I.6 (a), page 28)** "The Government may extend the term of this contract by written notice to the Contractor within ____ days provided that the Government gives the Contractor a preliminary written notice of its intent to extend at least ____ days before the contract expires." Would the government consider inserting 30 as the number of days for the notification period?

Answer:

The Final RFP will include the number of days. Normally CDC notifies contractors within 60 days.

219. **(Section L.12, page 58)** Offerors are referred to the DHHS Automated Information Systems Security Program Handbooks for security guidance. If any other requirements apply to the protection, handling, or accessing Government data, please so specify.

Answer:

The solicitation makes reference to internal agency documents, as well as NIST documents, many of which speak to issues of Information Protection and Systems Security. While the HHS AISSP handbook was updated in May, 1994, indicating that content may not provide complete guidance on some current operating considerations, the appendices do contain a rich listing of relevant documents, to which the offeror may turn. In light of the length of the list already at the disposal of the offerors, no further enumeration seems necessary.

220. **(Section L.12 "Systems Security (Feb 2000)")** states that proposals must include a copy of the offeror's systems security policy and practices. Is it correct to assume this will be an attachment to the Technical Proposal and will not be included in the page count? Will the systems security policy and practices be evaluated as an integral part of the Security Plan?

Answer:

Section L.1.2 will not be included in the final RFP. The security plan will be excluded from the page count.

221. **(Section L.16, Technical Proposal Instructions, Paragraph 2., Proposed Resources and Technical Approach, Security Plan, page 63)** This section states that the contractor shall provide a security plan in the Technical Proposal.

Comment: Security Plans are very important documents, addressing a variety of key elements. In brief form, they are often 15-20 pages in length.

Recommendation: Include the Security Plan as an attachment to the Technical Proposal and do not include it within the 100-page limit.

Answer:

See Answer 220. CDC agrees. The Security Plan may be submitted as an attachment to the Technical Proposal and will not be included in the page count.

222. **(Section L.3 FAR 52.219-24 Small Disadvantaged Business Participation Program-Targets (Jan 1999)** Reference is made to the Standard Industrial Classification System (SIC). Will the final solicitation reflect the North American Industrial Classification System that went into effect on 1 October 2000?

Answer:

Yes.

223. **(Section L.3: Paragraph L.3 on page 55)** makes reference to Standard Industrial Classification (SIC) Major Groups. Effective on 1 October of this year, the use of SIC for determining eligibility was replaced by the North American Industry Classification System (NAICS) for this purpose.

Suggestion: Here and in other places in the document where SIC is referenced, change to NAICS.

Answer:

See answer to Question 222.

224. **(Section L.3.b, page 55, FAR 52.219-24 Small Disadvantaged Business Participation Program – Targets (Jan 1999)** Offeror requests that that the Government identify targets for SDB participation by specific, current NAICS codes which have replaced SIC codes to ensure identification of appropriate SDB participants.

Answer:

The final RFP will include the use of NAIC codes; however, the government will not identify targets for SDB participation by specific NAIC codes.

225. **(Section L.5)** encourages offerors to inspect the multiple sites where services are to be performed. Please include specifics regarding when offerors can perform site visits.

Answer:

CDC does not plan to conduct site visits. This provision will be not be included in the final RFP.

226. **(Section C.20 (a) – “Reporting Requirements”)** The Government shows that MS Office is an approved software package. This paragraph states that reports should be submitted in WordPerfect. Will the Government also accept these reports in MS Word?

Answer:

Even though MS Office is approved for use as a software package at CDC, only Word Perfect has been approved as a universal format for the sharing of documents. All reports must be submitted in Word Perfect until such time that CDC's Standards are changed to authorize MS Word for that purpose.

227. **(Section M.3, Criterion 4, Item 4, and Section L.16, Section 4 (Page 67))** The term "strategic alliance" has several definitions. One definition describes a strategic alliance as an agreement between contractors to assist in the promotion of products and services (e.g., many IT services contractors today have strategic alliances with key COTS providers such as Microsoft, Oracle, Computer Associates, and HP). Another describes a strategic alliance as an alternative to the traditional subcontracting relationship, especially for large businesses. In this arrangement, one vendor is the prime with contracting responsibility and another is a key functional team player providing management and resources as an extension of the prime. Could the government provide its definition of a strategic alliance as it might apply to this contract?

Answer:

Strategic alliances, insofar as this acquisition is concerned, are relationships primes have with organizations, companies, other government entities, etc., whose expertise could be utilized during the course of the contract. CDC does not consider that strategic alliances are an alternative subcontracting relationships although during the course of contract performance a strategic alliance could perform work and as such become subcontractors. Strategic Alliances can fall into any number of arrangements; however, in all instances, the relationships would have to have a direct connection to the type work CDC is contracting for in this procurement in order to be an effective Strategic Alliance.

228. **Section L.15** requires "all key personnel of prime and senior most proposed member from subs to be present at orals." How can this be accomplished unless the prime contractors have exclusive relationships with the subcontractors? Several sections encourage the prime contractors not to require exclusive relationships with the subcontractors.

Answer:

CDC anticipates that subcontractor personnel may participate in oral presentations with more than one prime contractor.

229. **(Section M, Criterion 4(1), No page number, FAR Part 19 Adherence)** This paragraph discusses not restricting subcontractors' other activities with CDC. How does the CDC intend that prime contractors flow down the requirements of the OCI clause?

Answer:

CDC will leave this to offerors to decide. It is CDC's intention that offerors who are restrictive and who do not allow subcontractors to perform other work at CDC will receive less evaluation credit than those offerors who are not restrictive.

230. What will CDC's involvement be in the selection of subcontractors for the winning contractor? Will CDC take an active role in awarding task order work to subcontractors?

Answer:

Offerors will select subcontractors. Each offeror will bring their best team to CDC to evaluate. CDC will then make a best value award. After award, CDC will be involved in awarding Task Orders to the Contractor. Subcontractor(s) involvement in Task Orders will be a result of the Contractor's subcontracting agreements and the expertise required to do the work called for in the Task Order.

231. **(Section M.3, Criterion 4)** The draft RFP states that "...technical proposal so that subcontractors are restricted in any way from pursuing other opportunities at CDC,..." In other parts of the draft solicitation the intent seems more focused on this particular procurement to ensure that subcontractors are not prohibited from pursuing other opportunities on this contract with other potential primes. Please clarify what is meant by the statement in this section of the draft RFP.

Answer:

You have interpreted Section L incorrectly. See answer to inquiry 229.

232. **(FAR 19 Adherence, page 67, first and second bullets)** “Offerors are encourage to conduct the competitive subcontracting opportunities in much the same way as the Federal Government conducts competitive procurements ...”

In order to reduce the burden on the subcontracting community (primarily small businesses with limited resources) in responding to CDC desires, we recommend that all candidate prime contractors utilize the draft CITS requirements as a “boilerplate” for soliciting responses.

Answer:

CDC anticipates that offerors clearly understand what CDC intentions are in the Draft RFP.

233. **(Section G.15)** You state that the awardee will only be evaluated for adherence to its subcontracting plan at the end of the contract. Would CDC consider an annual evaluation to increase contractor accountability along with a financial penalty if it is found that a good faith effort to honor commitments is not being met? This has been found to be quite effective in other federal agencies in assuring that every effort is being met to achieve goals.

Answer:

CDC performs annual performance evaluations. In addition, CDC receives subcontracting reports every six months. Finally, the evaluation of the Small Disadvantaged Business Participation Plan will be reviewed at the end of the contract (seven years if all options are exercised by the Government). CDC believes these evaluations and timelines are sufficient. The Agency will not consider financial penalties to the Contractor for not meeting subcontracting goals. The Contractor will receive lower performance evaluations should the Contractor not make good faith efforts to meet subcontracting goals.

234. Please clarify how and when CDC requires for all the prime contractors to competitively select subcontractors for the CITS proposal team.

Answer:

CDC anticipates that offerors will have apparent subcontractor awardees at the time the Government receives proposals.

235. **(Section L,p.66)** Please clarify the requirement to compete subcontracting opportunities prior to contract award. Since you also suggest that subcontractors not sign exclusives, it seems unfair to expect SBs to bear the financial and administrative burden of competing for multiple contingency awards. Is this requirement also required of a teaming partner? Are you making a distinction between teaming partner and subcontractor? Please consider deleting this requirement as it takes valuable time away from preparing a good sound proposal.

Answer:

Small businesses will make their own decisions on how many offerors they will respond to. CDC does not make any distinction between teaming partners and subcontractors.

236. **(Section M, Criterion 4)** Given items 2 and 3 in this section, is it accurate to state that all subcontracting relationships which address Item 3 (SDB, HUBZone and firms with specific advanced technologies, etc.) will be scored higher if they are non-exclusive?

Answer:

Yes.

237. **(Section L.16 – “Specific Instructions”)** May the offeror substitute “fully executed Teaming Agreements for fully executed Subcontractor agreements? Until the final contract is awarded, we would not have the final clauses to be incorporated into a subcontract agreement.

Answer:

No. CDC has not required fully executed Subcontractor agreements with the Technical Proposal. To the contrary, CDC anticipates that Technical Proposals will be submitted with contingency subcontracting agreements and apparent subcontractor awardees.

238. **(Section L.16 part 4, “FAR Part 19 Adherence”)** requires not less than 30% for subcontracting plan goals. Is it the Government’s intent that the prime contractor subcontract 30% of the total contract value to small businesses or 30% of the planned subcontracting effort to small businesses?

Answer:

The Government’s intent is that no less than the percentage specified in the final RFP of the total contract value shall be subcontracted to FAR Part 19 type businesses.

239. **(Section L, page 66 Subcontracting Plan Goals)** Does the 30% small business subcontractor requirement apply to 30% of the contract value or 30% of the subcontracted dollars?

Answer:

See Answer 238.

240. **FAR 19 Adherence** Through discussions and reviewing FAR 19, we understand this section to read as follows: Prime contractor will develop a subcontracting plan that allocates 30% of subcontracting value to SBs; with SDB, WOB, HUBZones as subsets of that 30%. SDB participation plan will allocate 5% of the total contract value to SDBs. We believe these two plans to be mutually inclusive. Please confirm our understanding of the FAR 19 Adherence Goals for this contract.

Answer:

The Final RFP will clear up the issue of whether the Agency is requiring a minimum of the percentage stated in the final RFP of the subcontracting dollars or the percentage of the total estimated amount of the contract. In fact, CDC requires a minimum percentage of the estimated value of the contract to FAR Part 19 type companies. Your interpretation relative to types of FAR Part 19 businesses as subsets of the percentage is correct.

241. **Section L.16.4, Page 66, FAR Part 19 Adherence.** The direction given in this section asks that Offerors complete the Subcontracting Plan document and states that the Offerors should use a minimum of 30% for their subcontracting goals. In the next paragraph the CDC states that “The Contracting Officer will utilize only target percentages (as opposed to dollars) as the basis of determining if the Contractor has met its SDB participation targets during contract performance.”

Is the 30% subcontracting plan goal expressed as a percentage of: the total contract value, hours, or total subcontracted value? Does the 30% pertain solely to SDB business enterprises, or a combination of small, SDB, woman-owned, and HUBzone businesses? Please clarify the methodology to be used to evaluate and validate the subcontracting plans being submitted.

In addition, CDC encourages Offerors to competitively procure their subcontract opportunities in the same manner that CDC would for set-asides or other FAR Part 19 programs. Given the anticipated 45-day proposal response cycle, we recommend that CDC increase the time allowed for Offerors to compete these opportunities. If the 45-day cycle cannot be increased, we recommend that the requirement for “evidence that they have conducted competitive acquisitions” be removed.

Answer:

The Draft RFP clearly articulates that the Agency is interested in all FAR Part 19 type businesses. The Agency believes Section M clearly articulates the methodology to be used in evaluating this criterion. The DHHS Subcontracting Plan itself will be submitted with the Business Proposal and is not a part of the Section M evaluation methodology. CDC believes the timeframes allotted for this requirement is sufficient and will not change the “evidence” portion of the criterion.

242. **(Section L.16.c.4 FAR Part 19 Adherence, page 66)** Does the 30% requirement represent 30% of the amount to be subcontracted in accordance with P.L. 95-507?

Answer:

The percentage in the final RFP represents a percent of the total estimated value of the contract.

243. If a prime contractor does not meet the 30% set-aside goal, will there be a monetary penalty assess? It is respectively suggested for the Government to state the following in the final RFP: "The prime contractor is required to meet the 30% set-aside goal; failure to do will result in monetary penalties."

Answer:

No.

244. There are several references that the estimated subcontracting cost should be at least 30% of the total estimated contract cost (pg 64); however there is no specific requirement for a percentage to SBs or SDBs. Would CDC consider stating a minimum percentage for subcontracting to SBs and SDBs? This would ensure that small businesses are afforded a fair opportunity and that the bulk of subcontracting dollars are not awarded to large businesses.

Answer:

No. The Draft RFP requires a minimum percent (30%) to be subcontracted to FAR Part 19 type businesses. FAR Part 19 is exclusive to small businesses of every designation.

245. **(Section M.3 - Proposal Evaluation Criterion 4)** addresses adherence to FAR Part 19. The lead sentence states "this criterion will be scored on the strength of any subcontracting relationships..." although FAR Part 19 itself addresses Small Businesses. Do the statements in items 1 through 6 of this criterion apply to large business subcontractors as well?

Answer:

The statements in items 1 through 6 are intended to pertain only to small business subcontractors.

246. **(Section M.3, Part I, Criterion 4—FAR Part 19 Adherence, Number 1)** FAR Part 19 specifically relates to Small Business Programs. Are the requirements of this criterion applicable only to FAR Part 19 business concerns, or is it applicable to all potential subcontractors under this RFP? Please clarify, and if appropriate, modify the RFP to clarify the distinctions between small business and large business subcontractors.

Answer:

The requirements of this criterion are only applicable to FAR 19 business concerns. No clarification is needed for the final RFP.

247. **(Section L.17(c), Page 68, Business Proposal – Subcontracting Plan)** Paragraph c requests that the Offerors provide "your Subcontracting Plan with the Business Proposal." This statement appears to conflict with the statement on Page 66 regarding the completion of the Subcontracting Plan document. Please clarify.

Does item 1.a. pertain to the prime contractor only or should this requirement be for both the prime contractor and any subcontractors? In addition, is it CDC's intention that this cost detail be submitted as part of the Subcontracting Plan or as a separate part of the Business Proposal?

Answer:

The Subcontracting Plan itself is to be submitted with the Business proposal. Section L.17 c (1)a applies to both prime and subcontractors. Cost detail is not a part of the subcontracting portion of the Business Proposal.

248. **(Section L.16 “Technical Proposal Instructions, Historical Metrics”)** requests the Small Disadvantaged Business Participation Plan. Based on our understanding of the requirements of FAR Part 19 and FAR Clause 52.219-24, while there is a new Small Disadvantaged Business Participation Program, it is not clear that a separate Participation Plan is required. Will the Government accept an offeror’s current government approved Master Subcontracting Plan for Small and Small Disadvantaged Business Concerns, Women-Owned Small Businesses, Historically Black Colleges and Universities, and Minority Institutions that identifies goals and targets if it includes the percentages and dollar goals by company size classification to meet this requirement?

Answer:

No. The RFP clearly states that CDC recognizes that the Small Disadvantaged Business Participation Plan is new and that companies might not have developed such a plan. However, CDC does not believe a corporate master subcontracting plan is reflective of what the corporate division responding to the RFP has done in this regard. Therefore, a corporate master subcontracting plan is not a good substitute. The Draft RFP articulates clearly what CDC would like to see if a firm or corporate division does not have a Small Disadvantaged Business Participation Plan.

249. Which area of work, if any, is most critical? Hardware support? Software support? Help Desk support? Networking?

Answer:

The Government is unclear as to the intent of this question. Each of these support tasks are critical in their own right. Attachment J.8 lists priorities for degree of criticality within each of the tasks. Also, see Answer 1.

250. **(Section H.21)** Who makes the determination as to what is a critical task requiring personnel to remain on site. When is that determination made?

Answer:

The Project Officer will make this determination on a case by case basis as required.

251. **(Section C.8.B, Item 18)** What is currently in progress with regard to the development of plans to establish, revise, or improve databases?

Answer:

CDC does not plan to provide detailed project information with regards to database development and improvement. That level of detail will be provided in individual task orders after contract award. The list of tasks included under Section C.8.B was merely intended to provide a general idea of the types of tasks that may be required under this contract.

252. **(Section L.16, page 62, Understanding of Work”** When will CDC make operational the technical library for the CITS Contract to the contracting community? Can the information contained in the technical library be reproduced?

Answer:

The online sites referenced in Section L.16 are internet, not intranet, sites and are therefore already in the public domain.

253. To what extent are existing applications documented for purposes of maintenance? Does CDC have an existing documentation standard?

Answer:

Documentation standards are presently a CIO-level issue. Some applications are better documented than others. In general the level of system documentation available has been improving since such items are frequently specified in the task order SOW’s for contractor efforts.

254. **(Section C.8F Microcomputer Hardware Maintenance, Repair, and Support, page 20 of 39)**

Please provide historical data relative to numbers and types of maintenance, repair and support actions performed by the Contractor annually. Please provide a Government Furnished Equipment and Software list that will transfer upon contract award. Additionally, it is requested that CDC provide statistics on type and quantity of spare parts used annually.

Answer:

CDC will update this type of information to the extent it is available and include in the final RFP. Also, see Answer 1.

255. **(Section C.8.F(4). Page 22: Equipment Repair and Spare Parts Replacement)** “The Contractor shall inspect and test equipment after the item is repaired to ensure that all parts are functioning in a manner equal to or better than the parameters set forth in the manufacturer's specifications (to insure that the repair has been accomplished correctly and the reported condition has been corrected), all parts are securely mounted, wiring is properly routed and laced, circuit boards are secure, moving parts are free of obstructions, and the item is clean.”

Will the Offeror be responsible for installing and maintaining the wiring and cabling required to support Videoconferencing and/or the LANs and WANs or is the actual wiring and cable in CDC buildings installed and maintained by another contractor?

Answer:

The contract will not require installing and maintaining wiring and cabling required to support videoconferencing and/or LANs and WANs. Also., see Answer 1.

256. **(Section C.8.F(3), Page 21, Installation, Assembly and Testing Support)** This section states that “if assembly and testing are done at the contractor’s facility, the Contractor shall unpack and verify that equipment is received without damage, establish that the equipment is in proper working order, develop appropriate cabling and prepare special cables as necessary, and assemble and configure complete functional office systems according to user and other CDC specifications. This same requirement exists for assembly and testing at government locations.”

Will CDC make space available at delivery locations for acceptance and final staging of hardware before on-site installation? If not, we recommend that CDC provide guidance to the Offerors on how much facility space is necessary at the Contractor’s location to perform this effort so that all Offerors are proposing the same facility space.

Answer:

This work will not appear in the final RFP.

257. **(Section C.8C User Information/Help Desk, page 16 of 39)** Will contractor be provided access to the knowledge base (i.e. service call database, fix history, etc.) currently existing on the CDC Help Desk?

Answer:

The Problem Resolution Knowledge Database is GFE and will be provided upon contract award.

258. Does the “Problem Resolution Knowledge Database” used on the helpdesk belong to the Contractor or the Government? If it belongs to the Government, will this be provided as “Government Furnished Equipment (GFE)” or “Government Furnished Information (GFI)” or will the next contractor be required to build a new database from scratch?

Answer:

Access to the Problem Resolution Knowledge database will be provided to the next contractor at time of award.

259. **Section C.5, CDC Computing Environment** CDC should specify whether the LANs are centrally managed or are decentralized and support by their particular organizational structure. While the reduction in LANs is mentioned it is not clear how the total LAN environment is managed.

Answer:

CDC LANs are administered on a decentralized basis. However, the LAN architecture including the authorized equipment list is developed and managed at the CDC enterprise level.

260. More detail information concerning the legacy systems would be helpful. What is current inventory of legacy related systems hardware and software? Do any timeline expectations exist for migrating to client-server architecture?

Answer:

CDC does not have an inventory of legacy systems that can be provided to offerors. Timelines for migration from legacy to a multi-tiered architecture will vary. In general, the migration of legacy systems are targeted for completion over the next 3-5 years, with systems such as core human resources management migrating within approximately a year to a year and a half from now and systems such as core financial management migrating in the 2 - 3 year timeframe. Most legacy systems are currently in some stage of moving towards a multi-tiered architecture. As core functions are migrated, there will be additional migration tasks necessary to move peripheral systems to the matching environment.

261. **(Section C.9(j), Page 29, Organizational/Administrative Considerations)** "Title" in this provision obviously applies to hardware items. What provisions does the Government desire for software licenses?

Answer:

Any software or hardware procured with federal funds must be registered and/or titled to the government.

262. Does CDC anticipate a migration of all ADABAS applications to client-server or Web-based systems on another platform (e.g., Sybase or Oracle) over a given period of time? For example, what percentage of ADABAS applications does the Government expect to be migrated over the first 2 years of the new contract?

Answer:

Administrative applications will continue to migrate from ADABAS to LAN-level RDBMS servers. No specific time frame is available. Substantial volumes of scientific data will continue to be maintained on ADABAS for the indefinite future.

263. Is the "Problem Tracking System" a requirement of the predecessor contract to this vehicle? Is this considered Government Property or Contractor property? If not government property, will the new contractor need to enter data from the previous contract to make sure all tickets not completed at the predecessor contract's conclusion are still monitored? What is the typical number of calls currently being monitored on a daily basis?

Answer:

This portion of the SOW will not be included in the final RFP. See Answer 1

264. **Attachment J:** Are there separate projections available for web-based applications?

Answer:

The Government needs a more specific reference to be able to answer this question. (See answer to question 272)

265. **(Section H.27 Technology Refreshment, page 24)** Within 30 days after commercial announcement of new components or services that can be technically added to or substituted for technologies serving CDC/ATSDR's users, the Contractor shall provide descriptive technical and cost information to the CDC/ATSDR Co-Project Officer(s) or designated representative for review and consideration. Please clarify the intent of this statement. What standard or commercial publication does CDC use which constitutes commercial announcements? Will CDC issue a separate Task Order for the staff required to track and support this effort? Further, we recommend that the solicitation be changed to remove the "Within 30 days" statement to allow contractors the flexibility to propose their method to recommend improved technologies to serve CDC/ATSDR in a timely manner.

Answer:

The contract language will be revised in the final RFP. The contractor will be expected to maintain high levels of proficiency in the toolsets that the contractor claims competence in. Included in this toolset proficiency is awareness of upgrades, new product lines for the same vendor and competing products from other vendors. These activities generally occur either interspersed with the normal duties of the contractor personnel under existing Task Orders or on their own time as a simple matter of professionalism. Under some circumstances a separate task order might be issued for research and analysis regarding a particular technology question.

266. **(Section C.20 (b))** - In preparing to develop an “online reporting system” that is accessible to the Contracting Officer, Co-Project Officers, and Technical Monitors, what is the current number of these persons likely to need access during the “Base Year” and what growth factor might we expect in the Option Years?

Answer:

The expectation is that as many as 50 Government persons may need access to the online reporting system.

267. **MicroComputer – CDC Wide Requirements (page 17 of 19)**. How are the requirements on paragraph 1 (User Support & LAN) different than those under section C.3 and D? Are these redundant or is there a hierarchy?

Answer:

This is a redundancy that will be corrected in the final RFP.

268. **(Section C.4 Strategic Information System Direction)** Each CIO has a different set of goals and data needs. Given the public health priorities and problems, and the large amounts of data currently collected, what is the current status of combining these systems to increase data sharing and collaboration? Will the contractor work closely with the CIO to assist in data definition in common areas and discuss economies of scale program areas that could be shared to capture more data that would be useful in multiple studies and assist in eliminating program overlap? Please explain.

Answer:

There are a growing number of enterprise integration and data sharing efforts underway. The contractor can expect to be involved in these efforts and will be expected to operate in such a way as to aid the goals of enterprise integration and data sharing. The contractor will be expected to report opportunities for enterprise integration and data sharing to the Co-Project Officers.

269. **Information technology Investment Review Process:** Under the Clinger-Cohen ACT (CCA), Federal Agencies have been asked to improve their management processes for the selection and implementation of information technology resources. Due to the dynamics and rapid need to implement programs and projects due to disease outbreak, natural disasters, foreign country collaboration and other requirements, will the contractor have the ability to work with the Office of the Director Strategic Planning organization and the IRMO office to ensure that the rapid turnaround on IT requirements are within the guidelines of the CDC strategic direction? If so, how will this be accomplished?

Answer:

Yes, by direct consultation between contractor management and CDC management groups involved in IT governance for CDC. This governance is currently being reorganized and the details are not available at the present time.

270. **(Section C.5.G(2), Page 7: Network Topology)** This section states that “the contractor will only be responsible for supporting some WAN devices through task order. The Contractor will also be responsible for providing support for wide area connectivity devices as deemed appropriate such as multiplexors and switches. The Contractor will be responsible for providing support for limited Unix and any other networking products as may be implemented, as well as integrating those networks into CDC's wide area network environment.”

Communications devices such as hubs, switches, and routers are sometimes considered part of the wide-area network (WAN) and sometimes considered part of the local-area network (LAN), generally depending upon the local or wide-area functionality provided.

What are the specific points of demarcation for support under this program (i.e., WAN support versus LAN support)? For example, are maintenance support services for such devices encompassed to any extent by CDC agreements with hardware vendors? Can CDC identify any such agreements that CDC plans to incorporate into CITS?

Answer:

The preponderance of data support within the network topology of CDC which the CITS contract will support is very grounded in common industry standard devices such as Fast Ethernet switches and Gigabit Ethernet switches that are typically involved in LAN or intra-campus deployments. To a much smaller degree these switches are directly connected to devices within the CDC architecture that interface to WAN devices also such as SONET switches or ATM based devices. WAN based devices are defined as those that connect or link physically disparate CDC locations that can be defined as inter-campus links. There is a very limited requirement for operational, implementation and trouble-shooting support in these unique WAN endeavors (commonly termed 'edge' devices) due to the smaller numbers that are used. The in-depth support is incorporated in maintenance agreements with the specific vendors who either manufacture or resell these devices. CITS itself would not be the vehicle chosen as a maintenance support services for these devices that are typically termed WAN Layer 2 or Layer 3 switch devices. It is likely that CDC will require a small number of personnel (between two and six) supplied by CITS to have unique skill sets that includes knowledge of wide-area technologies such as T-1, T-3, ATM, broadband, H.320/H.323 video-conferencing, IP Telephony, etc.

271. **CDC Strategic Partnerships:** CDC has stated that there is a specific need for system integration, data standardization, distributed data management and communications. It requires interaction with its partners in health care and public health environments (Federal, state, local and private sectors). How will this contract help support the requirement, and will the partners be allowed to utilize the contract directly?

Answer:

There are a growing number of enterprise integration and data sharing efforts underway. The contractor can expect to be involved in these efforts and will be expected to operate in such a way as to aid the goals of enterprise integration and data sharing. The contractor will be expected to report opportunities for enterprise integration and data sharing to the Co-Project Officers. In some cases external partners will access contractor expertise through Direct Assistance components of grant and cooperative agreements awards.

272. **(Attachment J.X, Estimated Proportion of Information Systems Development and Maintenance by Platform)** Can the Contractor assume since no percentages were given for years 6 and 7 that they are the same as for year 5?

Answer:

This attachment will be deleted in the final RFP. References to platforms will be included in Section C in the final RFP.

273. **(Section C.8.B, Item 14)** For whose work does the contractor conduct IV&V services?

Answer:

IV&V activities will include several approaches including 1) IV&V done by CDC staff, 2) IV&V done by third party consultants, 3) IV&V done by other established contractors. The specific approach would be determined on a case-by-case basis. It is possible that the contractor would be asked to perform IV&V of work done by either the government or other vendors.

274. **(Section C.8 Contract (Page 11 of 39)—Tasks to be Performed B. 14)** Independent Verification and Validation (IV&V) of requirements, specifications, designs, products, integrated units and systems, documentation, and implementations.” Will you please clarify the extent and scope of the IV&V requirements? Specifically, who will perform IV&V on this contract’s products? Are you anticipating that this contractor will organize such that there will be an independent organization responsible for IV&V of development products, and/or will this contract’s contractor play IV&V for other CDC contractor products?

Answer:

IV&V activities will include several approaches including 1) IV&V done by CDC staff, 2) IV&V done by third party consultants, 3) IV&V done by other established contractors. The specific approach would be determined on a case-by-case basis. It is possible that the contractor would be asked to perform IV&V of work done by either the government or other vendors.

275. **(Attachment J-6)** Under Office of Program Support, Information Resources Management (IRMO) description, there is a mention of CDC WONDER. This package is not mentioned in the list of software or elsewhere in the DRFP. Please provide more specific information about this software.

Answer:

CDC WONDER is an Internet based searchable database of a wide range of CDC data. It is accessible on the CDC website.

276. **(Section C.8.c and C.8.e)** What tools—if any—are currently used to manage user support and help desk–related requests? Is Support Magic actually used or is it an example of a tool that could be used for both functions?

Answer:

Network Associates' Magic Help Desk software is currently being used to manage user support and help desk related requests.

277. **(Section C.8.B., Items # 11 and 21)** What are the specific I-CASE or CASE tools that CDC now uses or anticipates using?

Answer:

CDC programs use a wide range of case-like tools but do not have an enterprise designated I-Case standard. Most common are ERW in, BPERW in and the Rational Software products.

278. Compared to mainframe applications, to what extent has CDC used client-server technology as a basis for application support? What RDBMS tools does CDC use besides Sybase?

Answer:

Support Magic is widely used.

279. **(Section C.8.F (5) "Warranty Work")** How many OEMs is this paragraph referencing?

Answer:

This scope of work will not be included in the final RFP. See also Answer 1.

280. When do we take responsibility of new warranty equipment? (at end of warranty Period)

Answer:

See Answer 279.

281. **Section H.23, p. 21, Warranty Exclusion and Limitation of Damages – Special Provision**

We request a change to this section since an implied warranty of merchantability is inconsistent with industry standard. While the FAR does permit (FAR 52.212-4 (o)) a warranty of merchantability, FAR 12.302 (a) allows the Contracting Officer to tailor the provision to utilize commercial market practices. It is a generally accepted practice in the information technology industry as well as the commercial marketplace to disclaim all implied warranties of merchantability and fitness for a particular purpose. This is recognized in FAR 12.404 (b)(2). The benefit of such a disclaimer serves both the Government and the contractor by allowing flexibility to pursue optional solutions that may otherwise go overlooked and that may ultimately keep prices lower as a result of lower risk. Standard industry practice regarding supplies is to provide a pass through warranty from the manufacturer. We request that the Government replace the implied warranty of merchantability with an Express Warranty as recommended in FAR 12.104(b)(2) which "provides for the repair or replacement of defective items..."

Answer:

CDC is not conducting the acquisition using FAR Part 12. Also, the supplies called for in this procurement are incidental. That portion of the SOW which calls for microcomputer support services, repair and replacement of items/parts will not be included in the final RFP. See Answer 1.

282. **(Section C.8.F(5), Page 22, Warranty Work)** Warranty Work makes the Contractor responsible for “coordinating the warranty service with the OEM.” What access will the Contractor have to CDC’s purchasing and maintenance records to facilitate that coordination?

Answer:

These duties will not be included in the final RFP. See Answer 1.

283. **(Section H.26, Page 24, Warranty of Services – Special Provision)** Section H.26 requires a warranty for Year 2000 compliance on software, programming, applications, databases, and systems that are being designed, developed, or modified under this contract. Will all legacy software products that may require modification be Year 2000 compliant and certified as such prior to the work performed by Contractor?

Answer:

Even though CDC believes that all of its legacy systems are Year 2000 compliant, we will not provide a certification to that effect. The contractor will not be held responsible for preexisting noncompliances.

284. **Section H.26, p. 24, Warranty of Services – Special Provision**

We request that the Government delete Section H.26 as Year 2000 concerns are addressed in accordance with the FAR Clause included in Section H.8 – Year 2000 Compliance.

Answer:

Both Section H.8 and H.26 will be deleted in favor of more current language addressing Year 2000 compliance.

285. **(Section C.8.I, page 26)** Please provide more specificity as to the equipment CDC will provide (e.g., PCs, projectors, LAN access) and associated training materials, (e.g., CBT’s, training course material, etc.) required for the Training Facility.

Answer:

The Contractor is expected to furnish all equipment for the training facility. CDC will provide the software shown in an attachment to the final RFP. In special cases, CDC will also furnish software as required to conduct training on that specific software.

286. **(Section C.8 H. Training Facility, page 26 and Section H.10 Government Property, page 17)** Section C.8 references the requirement for a training facility and Section H discusses Government Property in general.

Has the Government provided any furniture or equipment to the incumbent contractor that should be used by the successful offeror in this procurement? What Government Furnished Equipment (GFE) will be provided to the successful offeror?

Answer:

CDC has not provided any furniture or equipment to the incumbent Contractor for the training facility nor does it intend to do so for the successful offeror.

287. **(Section C.8.I “Training Facility”)** Is the cost of this facility billable as an ODC? How often will it typically be used, i.e., does this facility need to be dedicated completely to CDC training classes or only on an as-needed basis? For what percentage of the business year would this facility be used for CDC training classes?

Answer:

CDC anticipates that the Contractor will have a training facility in the facilities leased for contract requirements. This training facility is to be dedicated to CDC training. The training facility will be billed according to the contractor's standard cost accounting system.

288. **(Section C.8, Contract Tasks to be Performed, Subparagraph H - TRAINING FACILITY (page 26 of 39))** Is the Training Facility requirement to be priced as a CDC-wide task order or will this be a part of dedicated task orders for individual CIO's?

Answer:

See answer to question 191.

289. **(Section C.11 "Government-Provided Training")** Please describe the types of immunizations that are required in Paragraph 2.

Answer:

Examples of immunizations or tests which might be required are hepatitis B, rabies, baseline serum, or TB skin test. This would apply only to those very few personnel who would require access to laboratory environments.

290. **(Section C.8.A., Page 11, Transition and Startup)** The CDC states that to allow maximum retention of corporate memory of incumbent personnel, the CDC may, at transition, grandfather those personnel into positions for which they do not meet the requirements stated in Section C of the contract. It appears that this provision favors the incumbent contractor because the incumbent will understand the appropriate labor categories for pricing such personnel. To offset this advantage, will CDC provide an estimate of the number of staff and their current labor categories for the staff that will be grandfathered?

Answer:

See answer to question 185. Because we no longer have minimum education and experience requirements, the Government does not feel this provides any special advantage to the incumbent.

291. **(Section C.8.A (page 10/39)—Transition and Startup)** "A smooth and orderly transition of computer support between the Contractor-supported environment and the successful offeror's environment is necessary to ensure minimum disruption to vital government business." Will the government supply the continuity of service transition plan from the incumbent contractor? This will be particularly useful in the response to the proposed transition and startup approach. CDC will benefit both in terms of time and cost between the closeout activities already detailed in the contract-mandated transition-out activities and the activities that will need to be planned for a successful bidder's transition-in and startup activities.

Answer:

The incumbent contractor is not required to provide a plan for continuity of service relative to transition. The Transition Plan is the responsibility of the successful offeror.

292. **(Section M.3—Proposal Evaluation Criteria, Part I, Criteria 2 – Proposed Approach)** It is unclear how the transition and startup will be evaluated. Given the criticality of these activities on this contract, will CDC consider providing specific transition and startup evaluation criteria? One criterion should be past performance success of the transition and startups on contracts of similar size and scope including such elements as incumbent employee capture and actual vs. proposed transition time.

Answer:

We do not anticipate providing any other evaluation criteria other than those in Sections L and M.

293. Is there a defined transition process for the awarded company to take over? See page 10

Answer:

The successful offeror shall be expected to generate a satisfactory transition plan.

294. **(Section B, Attachment J-1)** The schedules of prices/costs included in Section B do not require offerors to separately identify transition/phase-in costs.

Recommendation: The Government should require offerors to separately identify transition/phase-in costs to assist the Government in evaluating offerors proposals, similar to the approach required during the CISSS procurement. This will allow the Government to level the playing field when evaluating proposals since the incumbent contractor will presumably have no transition/phase-in costs.

Answer:

The final RFP will identify the requirement for both a transition plan and associated costs.

295. **(Section C.8.A. (page 11 of 39)—Transition and Startup)** “The contractor shall have management and administrative support in place to receive task requests within two weeks of contract award.” Does CDC plan to fund a Program Management Task to cover management and administrative support personnel that begins with transition and extends through the life of the contract? A factor to consider here is that CDC most probably pays for this support whether it is direct or indirect. However, as a direct charge, CDC has direct input into the use of resources.

Answer:

CDC plans to issue a contract management task order from the date of award forward. Included in this task order will be a separate line item for transition.

296. **Section B: (table, base & option periods) Time and Materials Type Task Order, Loaded Labor Rate** Should we have a separate table for labor categories & hours in Morgantown and Cincinnati. I think vendors need to know what the estimated amount of hours for each of these locations are. Vendors need to know that will need a presence in those cities. Might want to think of a table for Atlanta, Morgantown and Cincinnati. J.28 has some tables - I know that there are hours for Cincinnati and Morgantown, may not be these labor categories listed.

Answer:

The final RFP will have estimated hours for all locations that might have enough work to either warrant a contractor facility or consideration as to how the offeror will meet the requirements in those locations. Also, see Answer 1.