To All Suppliers:

The Commonwealth of Pennsylvania defines a solicitation “Addendum” as an addition to or amendment of the original terms, conditions, specifications, or instructions of a procurement solicitation (e.g., Invitation for Bids or Request for Proposals).

List any and all changes:

- Please find attached the question and response document pertaining to the formal inquiries submitted.

- A revised Appendix B, Definitions for the subject RFA is included. Please disregard the previous version.

- A revised Rider 2, Work Statement for the subject RFA is included. Please disregard the previous version.

- The language in Part I, Section I-5 is being amended as follows:

  I-5. **Method of Award.** Applicants may submit applications for multiple Regions, but not more than two Regions. Applicants must submit a separate application for each Region containing Technical and Cost. DHS intends to award at least one agreement to one Applicant in each Region. After final evaluation of applications, if it is determined to be in the Commonwealth’s best interest, the Commonwealth may request Applicants to submit integrated solutions for up to two Regions.

- The language in Part IV, Section IV-1 is being amended as follows:

  IV-1. **Nature and Scope.** The RRHCs shall provide facility consultation that includes clinical, operational and administrative support to prevent residents in facilities from COVID-19 infection and optimally manage them during a facility outbreak. This program shall provide educational support, onsite testing and infection control consultation, and clinical consultation. When needed, the RRHCs shall provide a Rapid Response Team to help facilities effectively identify and manage any COVID-19 outbreaks in partnership with DOH and DHS. The Rapid Response Team shall require internal teams comprised of, but not limited to, at least one attending level, PA licensed physician (MD or DO) who can provide standing
orders for testing, an infection control Physician, nurses, social workers and case managers, geriatric practitioner, internal medicine, family resident medicine as appropriate. The RRHCs shall provide access to COVID-19 testing and coordinate case reporting according to DOH guidance. The Rapid Response Team shall provide supplemental clinical and administrative staffing as well as personal protective equipment (“PPE”) as needed to address the needs of facilities during a staff or resident outbreak of COVID-19. The RRHCs shall also provide and coordinate cohort efforts and alternative care sites for optimal management of COVID-19 outbreaks in facilities. They shall also manage transitions of care of COVID-19 patients from the acute care inpatient setting. By December 1, 2020, the RRHCs shall conduct at least two onsite facility visits, and when requested by DHS, conduct at least one onsite consultation with other DHS-licensed facilities, and, when requested by DHS, consultation to Older Adult Daily Living Centers and State Veterans’ Homes.

- The language in Part II, Section II-6 is being amended as follows:

II-6. Cost Submittal.

Program Costs
The cost submittal worksheet is broken into three columns for capturing program costs (Columns E-G of Grant Cost Submittal Summary). General Program costs should include costs that support the work of the RRHC for the region. Examples of General Program costs should include costs associated with creating and operating a 24/7 call center staff, assessment staff, data collection and reporting, establishing and providing learning network services, and administrative oversight and support staff and costs associated with DHS requested onsite consultations with other DHS-licensed facilities, and, when requested by DHS, consultation with Older Adult Daily Living Centers and State Veterans’ Homes. Facility Support costs should include all expected costs to meet the two visits per facility as defined in Appendix B assisted living residence, personal care home and long-term nursing facility. Included in these costs is support for administering up to three tests as needed per resident and staff over the term of the Program. For the testing, Applicants should consider that some of these tests may be reimbursed by other sources. An estimated count of the facilities and residents for the region can be found on line 4 of the Cost Submittal Workbook. Rapid Response Costs should include all costs projected to respond to an outbreak at one or more facilities including the requirement to provide cohorting.

Category I: Administrative Personnel Costs Wages and Salaries: Please separate salaries and fringe benefits in the cost submittal. Applicants may list fringe benefits in aggregate for all staff but fringe benefit costs must not exceed 30% of salaries.

Category II: Operating Costs: Please include any other costs you expect to incur in order to administer the RRHC program. Examples include office space, telecommunications, communications support, software, office supplies and equipment and travel and training for staff. If you need to add additional categories, please be sure to include a description of the additional lines in your budget narrative.
• The language in Part III, Section III-6 is being amended as follows.

**III-6. Final Ranking and Award.**

B. For each Region, and except as provided in **Part III, Section III-6.C**, the Department must select for negotiations the Applicant(s) with the highest overall score(s).

• The above referenced sections are the only sections being modified; all other sections remain the same.

Except as clarified and amended by this Addendum, the terms, conditions, specifications, and instructions of the solicitation and any previous solicitation addenda, remain as originally written.

Respectfully,

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