



To: All Potential Offerors
From: Shannon Rodgers, Procurement Specialist
Date: November 25, 2020
Subject: RFP P434-20 PART A: Medical Equipment Procurement Consultant and PART B: Move Management/ Activation Consultant for the University of New Mexico New Hospital Tower

It shall be the responsibility of the interested Offerors to adhere to any changes or revision to the RFP as identified in this Addendum.

This addendum becomes part of the Proposal Documents and modifies, as noted below, the original bidding documents. The following provisions of the above-referenced RFP are amended as follows.

1. The NEW offer Due Date/Time is TUESDAY DECEMBER 8, 2020 @ 2:00 PM MST/MDT.

2. WRITTEN RESPONSES – QUESTIONS AND ANSWERS- PRE PROPOSAL CONFERENCE

QUESTION 1: Page 22, Item 3- Scope: Regarding FFE procurement. Is UNMH requesting procurement assistance from Consultant for IT devices such as desktop computers, printers, etc.?

UNMH RESPONSE: It is UNMH's intention to procure the "active devices", but coordination of the installation will be required by the consultant.

QUESTION 2: Regarding Exhibit J- Information System Security Plan Information. Is this Exhibit applicable to all potential consultants even if no software is being installed?

UNMH RESPONSE: Exhibit J is required by all, if within the scope of work provided by the Consultant access to a database will be provided, UNMH member will be logging into a system, or if network is used to access consultant, etc. Cyber insurance rules also apply.

QUESTION 3: In viewing Exhibit M drawings is the adjacent hospital building the only location that potential moves will take place from and into the new building?

UNMH RESPONSE: There will be limited moves form the main hospital, east of the new building. The majority of the moves will be new equipment coming into the new building. There is a small dock at the existing location, but equipment cannot be left on dock, and arrangements must be made with the dock in advance to prepare for receipt of the delivery.

QUESTION 4: Is there flexibility with moving items out of current hospital location to the new building with a moving truck vs. pushing product?

UNMH RESPONSE: Yes there is a loading dock at both locations. There is also an area a truck can park in parking area north of the BBRP, load and then be moved to the new location. See above on limitations of dock size.

QUESTION 5: How much or how many nursing stations and or complex areas are going to be moved into the new building? Is it visible on the floor plans? Potential headcount for move?

UNMH RESPONSE: Noted in RFP that approximately 5% of the scope of work is relating to relocating. There is also an FTE total headcount, and the estimate of those moving is fairly small. Overall the project is mainly new services that will be going into the new building.

QUESTION 6: In reference to the schedule for Move Management, does the Consultant need to determine timeline for involvement and start, or does Owner have desired expectation for start date?

UNMH RESPONSE: UNMH requests that the respondents use their professional judgement, expertise, and experience to provide a recommendation as informed by the Project Schedule and Scope of Services provided in the RFP. This recommendation should be included as part of the TAB B Approach Section. At a minimum, we expect that the respondents begin the move planning phase 12 months prior to Construction Substantial Completion for the Hospital, and 6 months prior to Construction Substantial Completion for the Garage. Activation Services might need to begin earlier, as required by the specific scope of service.

3. WRITTEN RESPONSES – GENERAL QUESTIONS AND ANSWERS

QUESTION 1: With the Thanksgiving holidays next week and the number of hard copies requested would you consider any extension of the 12/3 deadline for the proposals to add another day or two?

UNMH Response: The NEW offer due date/time is TUESDAY DECEMBER 8, 2020 @ 2:00PM MST/MDT.

QUESTION 2: Section 2.2.1-c- Also is the font size of 12 pt. Times Roman the only font you accept? We generally are at 11pt with most of our collateral and a diff sans serif font but we will change them all if this is a requirement.

UNMH RESPONSE: Responses to this RFP may be in 11 or 12 point font, and in any clear style such as Times New Roman, Calibri, Arial, etc.

QUESTION 3: In the original RFP, Part A, Section 3/Scope, question e, item 6 on page 14: What is the UNMH category?

UNMH Response: Section 3/Scope, question 6 is revised as follows;

The Medical Equipment list update should include the following minimum data for each piece of equipment:

1. Item name
2. Manufacturer
3. Vendor (when available)
4. Size and Location
5. Utilities
6. UNMH Category / Arch Code from attached Medical Equipment List
7. Room Name/Number
8. Department Name
9. Equipment Classification (e.g. Fixed, Moveable, etc.)
10. New or Existing
11. Availability via Group Purchasing Organization (e.g. Vizient.)
12. Estimated Cost
13. Such other information as UNM may reasonably request.

QUESTION 4: In the original RFP, Part A, Section 3/Scope, question r. on page 15: This paragraph indicates equipment requisitions to be sent using electronic data transfer. Is the intent that requisitions be sent in a manner that will directly feed into UNMH procurement system for approvals and ultimately generation of purchase order documents.

UNMH Response: Equipment requisitions will be delivered via email to UNMH Project Leadership, with a cc to UNMH Purchasing, and shall include appropriate backup documentation such that UNMH may complete its internal purchase requisition and purchase order process. At a minimum, such backup documentation shall include product specifications, transaction terms and conditions in form reasonably satisfactory to UNMH, contact information for the vendor's purchase representative, and as applicable information with respect to any product warranty, terms of any service contract approved by UNMH Clinical Engineering, acknowledgement of vendor's agreement to sign the UNMH Business Associate Agreement, a copy of vendor's certificate of insurance, a copy of vendor's cyber insurance, and UNMH IT's completed security review relating to the proposed vendor.

QUESTION 5: In the original RFP, Part A, Section 3/Scope, question cc, on page 16: The question states "Receive equipment into medical equipment inventory system as it arrives from the vendors." Is this inventory within the UNMH system or is this the inventory that is managed by the consultant for the project?

UNMH Response: UNMH's Clinical Engineering department will provide Trimedx tags and enter equipment information into their inventory. UNMH Finance Department will provide asset numbers. Consultant shall support and coordinate with these departments.

QUESTION 6: In the original RFP, Part B, and Section 3/Scope: Are there currently any specifications available for the FF&E material similar to medical equipment?

UNMH Response: FF&E procurement is outside the scope of PART B. PART B Section 3/Scope is revised as follows;

3. SCOPE The Consultant will be an independent third-party, and will report to the Owner and will be responsible for coordinating its activities with the Owner's representative (otherwise referred to as the PM) Contractor, and with vendors providing FF&E to Owner for this project. The Consultant will be responsible for coordinating of Owner-furnished furniture, fixtures and equipment (FF&E) as a part of the over-all Move Management effort. (Original paragraph continues)

QUESTION 7: Page 6 Section 2.1 - Due to Covid-19 restrictions with limiting interaction and touchpoints, are Hard Copy proposals required?

UNMH Response: Hard copies are required as noted in section 2.1.2. The number of hard copies required has been updated to One (1) Original and One (1) hard copy.

2.1.2 Proposal –

One (1) ORIGINAL
One (1) HARD COPY
One (1) ELECTRONIC COPY
ORIGINAL and COPY shall be in separate labeled binders.
The proposal can NOT be emailed.

QUESTION 8: Page 15 section 3, O – Will the consultant be responsible for negotiating Terms and Conditions or is the consultant only expected to provide support to the UNMH contract team?

UNMH Response: Consultant will be provided with contracting guidelines and standard terms and will endeavor to incorporate these into any agreement and will be in a supporting role for UNMH negotiations.

QUESTION 9: Page 16 section 3, W – Is the consultant responsible for reviewing and approving all invoices or only discrepant invoices brought to their attention by the UNMH team?

UNMH Response: Consultant will review all invoices to approve accuracy. Given Consultant's role in coordination, receiving, installation, inspection, etc., it is Owner's expectation that Consultant will "stand in the shoes" of the Owner for the first review of vendor invoices.

Consultant will only approve invoices after performing due diligence to ensure billed amounts fairly represent work completed, placed, etc.

QUESTION 10: Page 17 section 3, MM – Please expand on the preparing of documentation to support the Commissioning of the Medical Equipment as medical equipment (excluding imaging) typically does not go through the commissioning process.

UNMH Response: Commissioning is used as a generic term in this RFP to describe the process of conducting necessary oversight of the respective Medical Equipment Vendor team for them to prepare equipment for use in patient care. Additionally, it is intended that the Consultant will request necessary Field Installation Manuals and Checklists from the Medical Equipment Vendor for use by the General Contractor in their installation scope of work.

If there are any questions or inquiries in relation to this Addendum, Offerors may contact Shannon Rodgers at (505) 272-9571 or by email at sjrodgers@salud.unm.edu.