

UCI Health

REQUEST FOR PROPOSAL Comprehensive Oncology Services Strategic Assessment RFP# 0607UCIH2019

RESPONSES TO BIDDER QUESTIONS

1. Can we use subcontractors for this work?

Answer: No.

2. Can you define the 90 day window for implementation?

Answer: The 90 day refers to the duration of the engagement. During this 90 day period, UCI Health is seeking to achieve a comprehensive analysis of our current oncology service line as it relates to internal and external competition, positioning in the market, future states and other metrics to help assist in making key programmatic decisions.

3. Please clarify what is included in clinical staff? Does this include all faculty, providers, nurses? Can you please tell us what services are included in oncology service line (e.g., medical oncology surgery)?

Answer: Clinical staff include all faculty, providers, and nurses. Below are the list of services included in oncology service line-

- Lung/Thoracic
- Pancreatic
- Esophageal
- Gastric
- Renal
- Gynecologic oncology
- Orthopedic malignancies
- Dermatologic malignancies
- Melanoma
- Breast Cancer
- Colorectal Cancers
- Endocrine Cancers
- Head and Neck cancers
- Benign Hematology
- Genetics
- Nutrition
- Social services

4. The RFP calls for an electronic copy no later than July 5 and also for a printed hard copy. Is the printed hard copy also due (via courier or mail delivery service) on July 5, or after?

Answer: The bid response date has been amended from July 5, 2019 to the new date of July 9, 2019. Hard copy may be received after July 9th, as long as it is postmarked by July 9th. Electronic version of the complete response must be received at or before 3:00 pm July 9, 2019.

5. The RFP references an Excel template attachment labeled ID Badge Cost Proposal, but it does not seem to be included in the package of documents that we received from UC Irvine Health. Will this be made available to the bidding firms?

Answer: This is a scrivener's error. There is no Excel template for this RFP. Present your cost proposal in a manner that is consistent with your responses, and in a simple and easy to understand format, as instructed in the RFP Amendment.

6. Bidder may have an active BAA with UCI Health, if so, does it extend to this engagement, if selected. Would you like or need a second BAA executed with submission of the proposal?

Answer: If the presumptive winner of this RFP currently has a HIPAA BAA with UCIH at the time of contracting, it will be examined for appropriateness at that time. Alternatively, executing the BAA attached to the RFP, removes all doubt.

7. Can you please clarify the Scope of Work item listed on page 5 of the RFP (II. Scope of Work): "Evaluating all clinical staff including but not limited to people - power needs, including how they relate to research requirements (NCI P-30)." We read this to assume you mean workforce needs for strategic, clinical program growth and the potential relationship of additional faculty to the P-30 core grant, but would appreciate any additional commentary.

Answer: UCI Health is seeking to understand the current state and future needs of our central core of personnel and resource (with expertise in all type of clinical, clinical trials management, including protocol project managers, protocol development, design, activation, and regulatory affairs), in order to enhance our administrative and clinical supplements to meet the research requirements (NCI P-30).

8. Can you please clarify the item listed on page 15 of the RFP / Technical Proposal and Questions / Mandatory Questions: "Provide a complete and comprehensive implementation plan for UCIH through this RFP." Do you mean this question to refer to a complete implementation plan for the consulting project and process as outlined in the RFP (such as via project management plan, Gantt Chart, etc.)?

Answer: Yes, the answer you provided to your own question is accurate.

9. When is UCI's NCI Center Core (P-30) Grant up for renewal?

Answer: January 2020.

10. Our understanding in reviewing the solicitation is that the cancer program assessment is primarily to be focused on clinical services and while research strengths and gaps, cancer clinical trial accrual by disease site, and the role of the research program in the overall cancer program's profile, should and will certainly be considered, this engagement is not intended to be a cancer center research strategic plan or comprehensive research portfolio assessment. Please confirm or comment on our read of the requirements.

Answer: Your understanding is correct.