**NYS Department of Corrections and Community Supervision**  
**RFP #2020-16 Statewide Centralized Laboratory Services**

**Questions and Answers Posted January 28, 2021**

The following is official Questions and Answers which are hereby incorporated into RFP# 2020-16 – Statewide Centralized Laboratory Services.

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<tr>
<th>Question #</th>
<th>Corresponding IFB Section</th>
<th>Bidder’s Question</th>
<th>Answer</th>
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<tr>
<td>1</td>
<td>N/A</td>
<td>Please provide an updated annualized utilization of tests.</td>
<td>DOCCS will not be providing “an updated annualized utilization of tests” for this RFP. Due to the current climate, DOCCS annual utilization of tests would not be indicative or predictive of future test utilization.</td>
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<td>2</td>
<td>Section 5.4</td>
<td>Please clarify how bidders are to price tests not included on the NYS Medicaid fee schedule.</td>
<td>As stated in Section 5.4 under Payment Terms #6; “For each lab test not reported in the Medicaid Fee Schedule, DOCCS and the Contractor will negotiate a rate that is fair and customary. The rate must be justified, at a minimum by the contractor showing similar invoices to other governmental agencies in which they have performed the same service showing that DOCCS is receiving the lowest price.”</td>
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| 3          | Section 4.0                | Is the awarded bidder expected to receive SARS-CoV-2 (COVID-19) PCR testing? If so, we ask the following:  
  a) What is the modality, for this testing (ex: are bidders expected to provide collection and/or oversight for collection)?  
  b) What is NYSDOCC’s plan for vaccinations within the prison system? | Yes.  
  a) The vendor is expected to provide testing materials, process the tests and provide results.  
  b) This question is not relevant to the development of the proposal under this IFB. |
| 4 | Section 5.0 | In Section 5.0 Administrative Information – we ask the following:  
   a) Item 5.5 – Minority & Woman-Owned Business Enterprise Requirements; Paragraph five; Business Participation Opportunities for MWBEs lists an overall goal of 0%. However, on Attachment 5 – M/WBE Required Forms under the information for Form #1 – Bidder MWBE Utilization Plan, it states the document should be completed by all bidders responding to the RFP with an MWBE goal greater than zero. Additionally, in Attachment 13 – Proposal Document Checklist, it is also listed as a required form within the Administrative Proposal. Please clarify what documents related to Diversity Contracting Requirements must be submitted with proposals.  
   b) Item 5.8 Indemnification – would NYS DOCCS be willing to strike “The CONTRACTOR’s duty to indemnify shall cover direct, indirect, special and consequential damages.” from this section?  
   c) Item 5.27 Breach of Services – would NYS DOCCS be willing to make this term mutual? | a) Vendors are required to fill out forms #4 and #5 of Attachment 13. Due to the procurement having a MWBE utilization goal of 0%, vendors are not required to fill out forms #1 and #2.  
   b) No.  
   c) No. |
| 5 | Attachment 7 | Within Attachment 7 – Bidder’s Certified Statements we request the following exceptions:  
   • **Inspection** – For purposes of any contract resulting from this RFP, the quality of service is subject to inspection and may be made at any reasonable time by the State of New York. Should it be found that quality of services being performed is not satisfactory and that the requirements of the specifications are not being met, the Commissioner of DOCCS may terminate the contract and employ another contractor to fulfill the requirements of the contract. The existing Contractor shall be liable to the State of New York for costs incurred on account thereof.  
   • **Stop Work Order** - The Commissioner of DOCCS reserves the right to stop the work covered by this RFP and any contract(s) resulting therefrom at any time that it is deemed the successful Bidder is unable or incapable of performing the work to the state’s satisfaction. In the event of such stopping, DOCCS shall have the right to arrange for the completion of the work in such a manner as to ensure the completion of the work in the manner required by the contract. DOCCS will not accept either exemption request. |
manner as it may deem advisable and if the cost thereof exceeds the amount of the bid, the successful Bidder shall be liable to the State of New York for any such costs on account thereof. In the event that DOCCS issues a stop work order for the work as provided herein, the Contractor shall have ten (10) thirty (30) working days to respond thereto before any such stop work order shall become effective.

All other terms and conditions remain the same.

Please sign and return this Questions and Answers with your bid verifying receipt and that you acknowledge and accept these changes of the IFB.

“Accepted and Agreed To”:

__________________________ / __________________ / ____________ / ________________________________ Signature
Name                      Title                  Date

Applicants should monitor the following Web sites for posted updates or information:


NYS DOCCS’ Web site: https://doccs.ny.gov/procurement-opportunities