

Interested Party:

You are invited to submit a proposal in accordance with the requirements of the attached solicitation. The Medicare Payment Advisory Commission (MedPAC) expects to award a Level of Effort contract. Please provide your response to this Request for Proposal by close of business July 25, 2017. Submit your electronic response to procurement@medpac.gov.

The proposal must be signed by an official authorized to bind the offer, and it must contain a statement to the effect that the proposal is firm for a period of at least 60 days from the date set for receipt of proposal, including any extensions thereof.

This solicitation does not commit MedPAC to pay any cost incurred in the submission of proposals nor to procure or contract for supplies or services. Should you require any additional information regarding the statement of work, please feel free to contact me at the phone number/email below.

If you have any questions regarding this solicitation, please submit your questions to Tim Gulley via e-mail at tgulley@medpac.gov.

Thank you for your consideration.

STATEMENT OF WORK

CONTEXT

The Medicare Payment Advisory Commission (“MedPAC,” or “the Commission”) is a small (<40 full-time equivalent positions), independent non-partisan legislative branch agency that advises the Congress on issues related to the Medicare program. The Commission currently maintains its own internal computer network, consisting of several servers (e-mail, data, Citrix, telecommunications, *et cetera*; more complete detail below), approximately 40 wired workstations, and internet hardware / software that also serves to permit Commission staff to access MedPAC’s network remotely from a variety of personal devices. MedPAC’s information technology (IT) architecture is largely maintained by a single IT manager on staff.

Over the last decade, Congressional need for MedPAC’s analytic work products have put tremendous demands on our computer network. We currently house quantities of individually-identifiable health information (subject to data protection requirements of the Health Insurance Portability and Accountability Act (HIPAA) disproportionate to the size of the agency (we estimate we currently work with ~12 terabytes of online data residing on our network). Further, as workload has increased, our staff are now expected to be available on a nearly “around the clock” basis to handle existing standing assignments or to respond to ad hoc requests from the Congress. In recent years, these increasing demands have strained our network resources to their limits, resulting in reliability issues or system crashes that have at times put our ability to perform mission-critical activities at risk.

Within the last year, MedPAC has implemented a number of system upgrades to address these issues: Office 365 Migration, Windows server 2012, *et cetera*). These upgrades were largely completed December 2016. The early assessment of these upgrades is positive. However, to minimize the risk of unforeseen events going forward, and to plan for future requirements, MedPAC is looking to contract with a private third-party IT support firm to perform two major tasks: 1) ongoing remote monitoring of our network’s operations, and 2) *ad hoc* backup end-user support and elevated technical support for MedPAC’s IT manager.

A. GENERAL DESCRIPTION OF MEDPAC'S CURRENT IT ARCHITECTURE

1. SYSTEM Overview

The System provides LAN/WAN connectivity for the entire organization. It links Cisco routers and 6 x T-1 lines to provide WAN connectivity. Cisco 4000 routers linked by dedicated T-1 lines provide high-bandwidth connectivity between sites with heavy WAN traffic (*e.g.*, Citrix and S-3 secure cloud). Figure 1-1 presents the Data Network diagram for the WAN. Switches and hubs from various manufacturers provide LAN connectivity.

The following is a preliminary list of network hardware and software items to be managed: #

- Cisco 4000 Series Routers
- Cisco 5500 ASDM
- 6 x T-1 Multilink Bundle
- Netgear Ready NAS
- Netgear Managed Switches
- HP Network Multi-Function Printers
- Mitel Phone System, including PRI line connectivity
- Microsoft 2008 R2 Active Directory and DNS
- Microsoft File and Print Server
- Microsoft Sharepoint Office 365
- Microsoft Hyper-V server hosting virtual desktops and virtual server
- Microsoft Outlook Office 365

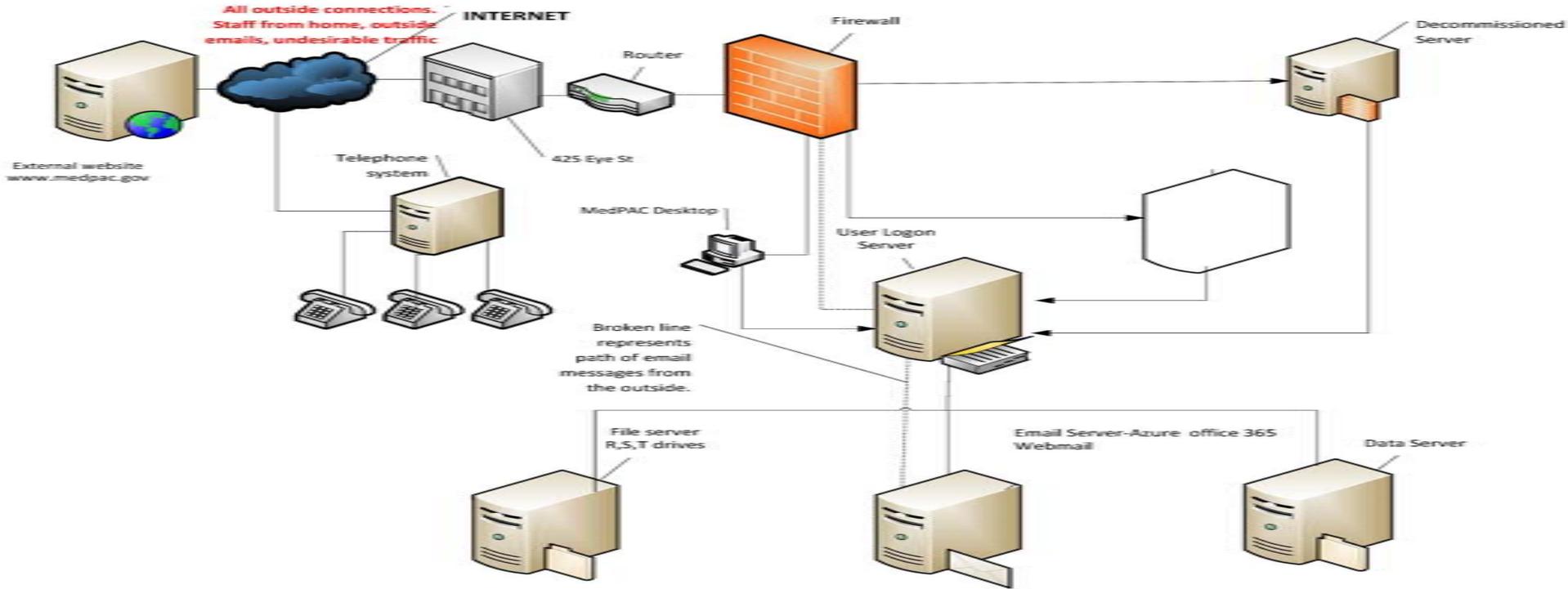


FIGURE 1-1. DATA NETWORK

B. OVERVIEW OF CURRENT NEEDS

MedPAC wishes to consult with a third-party information technology support firm to assist with two general tasks, which will be awarded under a single contract (*i.e.*, they are not separable):

- i) Remote monitoring / troubleshooting / intervention of MedPAC's network operations. Monitoring should include all mission-critical aspects of MedPAC's network (servers, e-mail, website, firewall and network security, *et cetera*). Monitoring should be implemented for hardware issues, software issues, and security issues (network intrusions, *et cetera*). Monitoring processes should generate immediate notifications (e-mail, SMS text) of any anomalies that are sent to the contractor's on-call technical staff, MedPAC's IT manager, and other designated MedPAC executive staff. The contractor should advise as to when software updates should be applied.

- ii) Provide standing and *ad hoc* backup support to MedPAC's information technology manager during planned or unplanned absences, and serve as an elevation resource for MedPAC's IT manager in troubleshooting IT issues as warranted. Based on the familiarization obtained through the IT audit described in (B)(i), the selected contractor would provide backup support to MedPAC's IT manager in several capacities:
 - a. Provide frontline end-user support to MedPAC staff during the IT manager planned (*e.g.*, vacation) or unplanned (*e.g.*, illness) absences from MedPAC's offices, and
 - b. Monthly check-in with MedPAC's IT manager re: system performance / updates, and provide elevated technical assistance to MedPAC's IT manager in troubleshooting higher-level issues with MedPAC's computer networks.

Performance of all tasks under B(ii) will be done on a collaborative basis (*i.e.*, either the end-user or the IT manager should be fully engaged in any troubleshooting, *et cetera*, and be made aware of problem diagnosis and resolution to the degree appropriate to the situation). We do not desire solutions that involve full remote desktop control that disengages the MedPAC staffer being assisted.

These tasks are not separable – interested offerors must submit a proposal that responds to both tasks, and a contract will be awarded to a single entity to perform both tasks.

C. LEVEL OF EFFORT

- i) Remote monitoring / troubleshooting / intervention of MedPAC's network. We would anticipate that this task would require a maximum of 1-2 days of on-site assessment by the contractor's personnel assigned to this task to validate all hardware / software implicated in the monitoring requirement, and establish all necessary remote connections and alerts. We require a weekly e-mail summary of any issues affecting the network identified through remote monitoring (or an affirmation that no issues have occurred), and a monthly telephone or in-person synopsis of issues and recommended updates.
- ii) *Ad hoc* support. We roughly estimate the level of effort associated with the tasks under Section B(ii), above, as follows:
 - a. *Frontline end-user support*. Rough estimate of approximately 150 hours / year. We anticipate that the majority of this work could be performed from the selected contractor's location by telephone, but on occasion the contractor's staff may be required to work in-person at MedPAC's offices. In their proposals offerors should include in the level of effort the implementation of a ticketing portal that would permit tracking of responses to end-user assistance requests that could be exercised at MedPAC's discretion.
 - b. *Monthly check-in / higher-level support*. We anticipate 3-4 hours each month on-site at MedPAC's offices for a regular check in, with higher-level support requested as needed.

PACKING AND MARKING

All deliverables required under this contract shall be packaged, marked, and shipped in accordance with the Statement of Work and any additional requirements set forth in individual task.

INSPECTION AND ACCEPTANCE

All work described in the statement of work to be delivered under this contract is subject to final inspection and acceptance by an authorized representative of the Government.

The Project Officer is responsible for the, technical monitoring, and evaluation of the Contractor's technical performance. The Project Officer shall perform inspection and acceptance to determine if the deliverables meet the requirements as MedPAC has set forth in this contract. Such approval will indicate acceptability to MedPAC performance in accordance with the requirements of the Statement of Work and the terms and conditions of this contract and will be subject to applicable warranties. MedPAC reserves the right to perform any inspections and audits as deemed necessary to assure that the Contractor's services conform to prescribe requirements.

DELIVERIES OR PERFORMANCE

I. **PLACE OF DELIVERY**

All items called for herein shall be shipped to the project officer's address:

Medicare Payment Advisory Commission
425 I Street, NW
Suite 701
Washington, DC 20001

II. **PERIOD OF PERFORMANCE**

The contract will cover a one year period, approximately October 1, 2017 through September 30, 2018.

CONTRACT ADMINISTRATION DATA

I. **DESIGNATION OF PROJECT OFFICER AND TECHNICAL DIRECTION**

A. Howard Patterson is hereby designated as the MedPAC Project Officer under this contract and can be contacted at the following address:

Medicare Payment Advisory Commission
425 I Street, NW Suite 701
Washington, D.C. 20001
Telephone Number: (202) 220-3700

B. Project Officer is responsible for:

1. The issuance of task requests to perform work as described in the Statement of Work.
2. Directions to the Contractor which redirect the contract effort, shift work emphasis between project areas or tasks, require pursuit of certain lines of inquiry, fill in details or otherwise serve to accomplish the contractual statement of work.
3. Provision of information to the Contractor which assists in the interpretation of specifications or technical portions of the work described.
4. Review and, where required by the contract, approve technical reports, specifications, and technical information to be delivered by the Contractor to MedPAC, under the contract.

C. The project officer shall, at the time of issuance of a task request, identify the MedPAC analysts responsible for day-to-day direction of the task request. Technical direction given by analysts, once a task request has been issued, does not require project officer approval.

Technical direction must be within the general scope of work stated in the contract. The project officer does not have the authority to and may not issue any technical direction which (1) constitutes an assignment of additional work outside the general

scope of the contract; (2) constitutes a change as defined in the contract clause entitled "Changes;" or (3) changes any of the expressed terms, conditions, or specifications of the contract.

If in the opinion of the Contractor, any instruction or direction issued by the Project Officer is within one of the categories defined in (1) through (3) above, the Contractor shall not proceed but shall notify the Contracting Officer in writing within five working days after receipt of any such instruction or direction, and shall request the Contracting Officer to modify the contract accordingly. Upon receiving such notification from the Contractor, the Contracting Officer shall issue an appropriate contract modification or advise the Contractor in writing that the technical direction is within the scope of this clause and does not constitute a change under the "Changes" clause of this contract. The Contractor shall thereupon proceed immediately with the direction given. A failure of the parties to agree upon the nature of an instruction or direction or upon the contract action to be taken with respect thereto shall be subject to the provisions of the contract clause entitled "Dis

The Contractor shall proceed promptly with the implementation of all technical directions duly issued by the Project Officer.

II. DESIGNATION OF CONTRACTING OFFICER

A. Timothy Gulley is hereby designated as the MedPAC Contracting Officer under this contract and can be contacted at the following address:

Medicare Payment Advisory Commission
425 I Street, NW Suite 701
Washington, D.C. 20001
Telephone Number: (202) 220-3700

B. Contracting Officer is responsible for:

1. The overall contract administration.
2. The Contracting Officer is authorized to make bilateral and unilateral changes to the contract that may result in extending the contract period of performance; make changes requested by the contractor; scope of work; contract price; quantity; quality; and delivery schedule by a properly executed modification to the contract.
3. All payment inquiries.

III. SUBMISSION OF INVOICES

The contractor's invoice, for each task request, shall itemize the days and hours worked. An original invoice or voucher, including required supporting statements or certifications and prominently identified with the contract number, shall be submitted by the Contractor to:

IT Support Services
Medicare Payment Advisory Commission
425 I Street, NW, Suite 701
Washington, D.C. 20001
Attn: Accounts Receivable

IV. INVOICE PAYMENT

Payment shall be made on this contract as close as possible to but not later than 30 calendar days after a complete invoice received by the Contracting Officer and the in the monthly progress report has been received by the project officer.

V. METHOD OF PAYMENT

- A. Payments under this contract shall be made by electronic transfer through the Treasury Financial Communications Systems at the option of MedPAC.
- B. Within 7 days of receiving notice of award, the Contractor shall forward their financial information, in writing, to MedPAC to facilitate contract payments.
- C. Any changes to the information on Attachment D shall be furnished, in writing, to the Contracting Officer. It is the Contractor's responsibility to furnish these promptly to avoid payments to erroneous addresses or bank accounts.

IT Support Services
CONTRACT CLAUSES

Clause 1 Limitation of Cost

- (a) The parties estimate that performance of this contract, exclusive of any fee, will not cost the Government more than the estimated cost specified in this contract. The contractor agrees to use its best efforts to perform the work specified in this contract and all obligations under this contract within the estimated cost.
- (b) The Contractor shall notify the Project Officer in writing whenever the amount invoiced under this contract is within twenty percent (20%) of the total authorized amount of the contract. This limitation does not apply to fixed priced contracts.
- (c) Except as required by other provisions of this contract, specifically citing and stated to be an exception to this clause
 - (i) MedPAC is not obligated to reimburse the contractor for costs above the total authorized amount of this contract;
 - (ii) The contractor is not obligated to continue performance under this contract (including actions under the Termination clause of this contract) or otherwise incur costs in excess of the total amount of this contract, until the Contracting Officer notifies the contractor in writing that the total authorized cost of the contract has been increased.

Clause 2 Allowable Cost and Payment

- (a) Final payment.
 - (i) The contractor shall submit a completion invoice or voucher, designated as such, promptly upon completion of the work, but not later than one year (or longer, as the contracting officer may approve in writing) from the completion date. Upon approval of that invoice or voucher, and upon the contractor's compliance with all terms of this contract, the Government shall promptly pay any balance of allowable costs and that part of the fee (if any) not previously paid.

(ii) The contractor shall pay to the Government any refunds, rebates, credits, or other amounts (including interest, if any) accruing to or received by the contractor or any assignee under this contract, to the extent that those amounts are properly allocable to costs for which the contractor has been reimbursed by the Government. Reasonable expenses incurred by the contractor for securing refunds, rebates, credits, or other amounts shall be allowable costs if approved by the contracting officer.

Clause 3 Rights in Data

(a). Data, information, or analysis generated or derived by research or other activities funded by this contract shall be used only for the purposes of the contract. Such data, information or analysis shall not be used or disclosed for any purpose other than to fulfill the requirements set forth in this contract. All research materials, except the contractor's own notes, compiled by the contractor in the performance of this contract are the sole property of MedPAC and shall be returned to it at the conclusion of the project.

(b). Where data and other information provided by MedPAC to the Contractor comes from the Centers for Medicare and Medicaid Services (CMS), or any other Federal or State entity, the Contractor agrees to abide by, and when requested by MedPAC to execute, applicable data use agreements (or comparable documents).

(c). Research and analysis funded under this contract may be published by MedPAC, in its discretion, as an official MedPAC report. An official government report is a work of the United States Government and, under the terms of 17 U.S.C. '101,105, not eligible for copyright protection.

(d). MedPAC is the sole owner of any intellectual property arising or resulting from the performance of this contract. MedPAC grants to the contractor a royalty-free, non-exclusive license to utilize any such intellectual property and to publish any analysis or interpretation of such intellectual property in scientific, technical or professional journals, consistent with the requirements of paragraphs e and f below. Nothing in this agreement is intended to limit the contractor's right to seek copyright protection, consistent with Federal law, for such publication.

(e). The contractor agrees not to disclose, verbally or in writing, any data, information or analysis generated or derived by research or other activities funded by this contract for the period beginning with the issuance of the initial task order through June 30th following completion of the project without prior MedPAC approval. The contractor must provide MedPAC information necessary for it to approve disclosure.

(f). After June 30th following completion of the project, the contractor may publish or otherwise disclose any analysis or interpretation of data, information, or analysis generated or

derived from research or other activities funded by this contract. Prior to publishing or otherwise disclosing such analysis or interpretation, the contractor shall notify MedPAC of its intent to do so.

(g). If MedPAC so requests, the Contractor shall include the following acknowledgment of MedPAC support as part of any written publication of research funded by this contract:

The research underlying this [article] was completed with support from the Medicare Payment Advisory Commission. The findings, statements, and views expressed are those of the authors and do not necessarily represent those of the Commission.

Clause 4 Changes

(a) The Contracting Officer may at any time, by a written order, and without notice to the sureties, if any, make changes and additions within the general scope of this contract including but not limited to any one or more of the following: (i) topics to be covered; (ii) methodology to be employed including travel and interviews; (iii) method of presentation of results including oral presentations in any place; and (iv) number of copies of reports required.

(b) If any such change causes an increase or decrease in the estimated cost of, or the time required for, performance of any part of the work under this contract, whether or not changed by the order, or otherwise affects any other terms or conditions of this contract, the Contracting Officer shall make an equitable adjustment in the (1) estimated cost, delivery or completion schedule, or both; (2) amount of any fixed fee; and (3) other affected terms and shall modify the contract accordingly.

(c) The Contractor must submit any "proposal for adjustment" (hereafter referred to as proposal) under this clause within 30 days from the date of receipt of the written order. However, if the Contracting Officer decides that the facts justify it, the Contracting Officer may receive and act upon a proposal submitted before final payment of the contract.

(d) Failure to agree to any adjustment shall be a dispute under the Disputes clause. However, nothing in this clause shall excuse the Contractor from proceeding with the contract as changed.

(e) Notwithstanding the terms and conditions of paragraphs (a) and (b) above, the estimated cost of this contract, shall not be increased or considered to be increased except by specific written modification of the contract indicating the new contract estimated cost. Until this

modification is made, the Contractor shall not be obligated to continue performance or incur costs beyond the point established in the Limitation of Cost clause of this contract.

Clause 5 Termination for the Convenience of the Government

The Contracting Officer, by written notice, may terminate this contract, in whole or in part, when it is in the best interest of the Government. In the event of such termination, the Government shall pay the Contractor (i) the amount stated in the contract payment provisions for completed work accepted by the Government, and (ii) an amount agreed upon by the Contractor and Contracting Officer for the partially completed work which is accepted by the Government. Failure to reach an agreement as per (ii), above, shall constitute a "dispute" under the Dispute Clause.

Clause 6 Disputes & Protest

All claims by a Contractor against MedPAC relating to this contract shall be in writing and shall be submitted to the Executive Director for a decision. The Executive Director shall issue a decision in writing, and shall mail or otherwise furnish a copy of the decision to the Contractor. The decision shall state the reasons for the decision reached, and shall inform the Contractor of his or her rights as provided in the contract.

Clause 7 Stop Work Order

The Contracting Officer may, at any time, by written order to the Contractor, require the Contractor to stop all, or any part, of the work called for by this contract for a period of 90 days after the order is delivered to the Contractor, and for any further period to which the parties may agree. The order shall be specifically identified as a stop work order issued under this clause. Upon receipt of the order, the Contractor shall immediately comply with its terms and take all reasonable steps to minimize the incurrence of costs allocable to the work covered by the order during the period of work stoppage.

Clause 8 Notice Regarding Late Delivery

In the event the Contractor encounters difficulty in meeting performance requirements, or anticipates difficulty in complying with the contract delivery schedule or date, the Contractor shall immediately notify the Contracting Officer and Project Officer thereof in writing, giving pertinent details, including the date by which he expects to complete performance or make delivery; provided, however, that this data shall be informational only in character and that receipt thereof shall not be a waiver by the Government of any contract delivery schedule or date, or any rights or remedies provided by law or under this contract.

Clause 9 Inspection and Audit

MedPAC, through any authorized representatives, has the right at all reasonable times, to inspect, or otherwise evaluate, the work performed or being performed hereunder either at MedPAC or on the premises on which it is being performed, at the election of MedPAC.

Clause 10 Subcontracts

- (a) The Contractor shall not enter into any subcontract, purchase order to accomplish work required under this contract or work related to that required under this contract without the prior written approval of the Contracting Officer.
- (b) Authorized subcontracts shall be made in the name of the Contractor and shall not bind nor purport to bind the Government. The making of subcontracts hereunder shall not relieve the Contractor of any requirement under this contract.

Clause 11 Assignment of Claims

- (a) The Contractor, under the Assignment of Claims Act, as amended; 31 U.S.C. 203, 41 U.S.C. 15 (hereafter referred to as the “the Act”), may assign its rights to be paid amounts due or to become due as a result of the performance of this contract to a bank, trust company, or other financing institution, including any Federal lending agency. The assignee under such an assignment may thereafter further assign or reassign its right under the original assignment to any type of financing institution described in the preceding sentence.
- (b) Any assignment or reassignment authorized under the Act and this clause shall cover all unpaid amounts payable under this contract, and shall not be made to more than one party,

except that an assignment or reassignment may be made to one party as agent or trustee for two or more parties participating in the financing of this contract.

Clause 12- News Releases/Endorsements/ Advertising

(a) The Contractor agrees that in the release of information concerning, or resulting from, this contract such release shall include a statement to the effect that the project is sponsored by MedPAC and, if deemed applicable by MedPAC, a disclaimer that views expressed do not necessarily represent that of MedPAC.

(b) The Contractor agrees not to refer to this contract or MedPAC, in advertising, promotional or any other materials, in such a manner as to state or imply that the products or services provided are endorsed or preferred by MedPAC or are considered by MedPAC to be superior to other products or services. No news release, press conference, or advertisement pertaining to this contract will be distributed or broadcast without prior written approval by MedPAC.

Clause 13 Compliance with Laws

The Contractor shall comply with all applicable Federal, State, and local laws rules and regulations applicable to its performance under this contract. The Contractor further agrees to hold MedPAC harmless from any and all liabilities, claims fines, penalties, including reasonable costs and settlements, which may arise out of the delivery by the Contractor of goods or supplies or the furnishing of services that do not meet the requirements of any applicable laws or regulations.

Clause 14 Patent and Copyright Infringement

The Contractor warrants that the products, in the form delivered to MedPAC, are free from any valid claim for patent infringement and that any labels or trademarks affixed thereto by or on behalf of the Contractor are free from any valid claim for copyright or trademark infringement and agrees to save and hold harmless and indemnify MedPAC against such infringement liability based upon MedPAC's possession thereof without alteration.

Clause 15 - Central Contractor Registration

Prospective contractors shall be registered in the General Services Administration's System for Award Management (SAM) database prior to award of a contract or agreement.

INSTRUCTIONS, CONDITIONS, AND NOTICES TO OFFERORS

I. INSTRUCTIONS TO OFFERORS

Offerors shall follow the instructions below for the format and content of proposals. Special attention is directed to the requirements for technical and price proposals to be submitted in accordance with Paragraphs B and C of these instructions.

A. General Information

1. The purpose of this Request for Proposal (RFP) is to provide interested offerors with sufficient information to enable them to prepare and submit proposals for consideration by MedPAC.
2. Proposals should be emailed to procurement@medpac.gov. MedPAC is not responsible for any technological problems which may delay or preclude receipt of any proposals submitted via email alone, including communications failures, actions of junk e-mail (spam) filters, *et cetera*. Any questions regarding this RFP should be emailed to Tim Gulley at tgulley@medpac.gov.
3. The offeror's proposal in response to this Request for Proposal shall be prepared in accordance with these instructions. Offerors whose proposals deviate from these instructions may be disqualified at the discretion of MedPAC.
4. For Task 1, proposals must include technical approaches to the monitoring process, including a list of specific monitoring functions, report frequencies (e-mail and phone), and the offeror's primary point of contact with responsibility for this contract..

For Task 2, proposals should describe the proposed technical approach to providing end-user support to MedPAC staff (*e.g.*, telephone or in person; use of remote desktop interventions; use of ticketing system; escalation; reporting outcomes MedPAC's management; *et cetera*), and generally describe corporate qualifications of staff who would be assigned to provide back-up end-user support to MedPAC's IT manager, as well as corporate qualifications relevant to providing more in-depth elevation support to

MedPAC's IT manager when warranted. These descriptions should be made in light of MedPAC's existing IT architecture (Statement of Work Section).

5. MedPAC reserves the right to enter into negotiations with any or all of the offerors as it deems to be in the best interest of MedPAC.
6. MedPAC reserves the right to reject any proposal received at the location after the time and date specified on the cover page of this solicitation.
7. This request does not commit MedPAC to pay any preparation cost nor to make reimbursements for any of the costs associated with a response to this request.
8. MedPAC reserves the right to reject any and all proposals received as a result of this request. Non-compliance with the conditions of this RFP may result in disqualification of the offeror
9. MedPAC may reject an offer as non-responsive if it is materially unbalanced as to prices for the requirements. An offer is unbalanced when it is based on prices significantly less than cost for some work and prices which are significantly overstated for other work.
10. MedPAC reserves the right to disqualify, or to impose conditions upon an offeror to avoid organizational conflicts of interest which might create the appearance that MedPAC's independent and impartial judgment has been impaired. Offerors may be asked to submit additional information so MedPAC can determine whether such organizational conflicts of interest, real or apparent, exist.
11. MedPAC reserves the right to cancel this solicitation at any time.

B. Late, Submissions, Modifications and Withdrawals of Proposals

1. Any proposal received at the office designated in the solicitation after the exact time specified for the receipt will not be considered unless it is received before award is made.
2. A modification resulting from the Contracting Officer's request for "best final;" offer received after the time and date specified in the request will not be considered unless received before award and the late receipt is due solely to mishandling by MedPAC and receipt at the MedPAC.

C. Submission of Proposals

1. Proposal shall be submitted in two (2) severable parts as set forth below:

Part I- Technical Proposal

Part II- Cost Proposal

Technical proposals should be limited to no more than 15 pages, not including resumes of key staff who would be assigned for the duration of the contract or other supporting documentation.

The cost proposal shall detail the costs of performing each of the two tasks at the level of effort described in the Statement of Work.

2. Proposals shall be conspicuously marked with the RFP number and delivered to MedPAC prior to the closing time and date set forth in the RFP letter for receipt of proposals.
4. MedPAC will evaluate proposals in accordance with the evaluation of technical proposal set forth below.
5. The Executive Director or Deputy Director are the only individuals who can legally commit MedPAC to the expenditure of public funds in connection with this proposed acquisition.

EVALUATION FACTORS FOR AWARDI. Basis for Award

MedPAC will evaluate offers in response to this RFP and award a contract to the technically acceptable offeror whose offer best conforms to the solicitation, and is judged to be most advantageous to MedPAC. *Separate technical and cost evaluations will be performed.*

While the lowest total cost to MedPAC is a heavily weighted factor, MedPAC reserves the right to select the sources whose proposal offers the greatest value to MedPAC in terms of performance and other factors.

II. Complete Information

Failure to furnish complete information requested in the RFP may cause the offeror to be deemed unacceptable and immediately be removed from further consideration. *Any proposal that addresses only part of the technical requirements may not be considered fully responsive to MedPAC's technical needs and may not be accepted.*

MedPAC may award without discussions.

III. Evaluation of costs

Cost proposals will be evaluated to assess the reasonableness of the proposed cost/price and to determine the probable cost to MedPAC.

IV. Evaluation of technical proposal

The technical evaluation will be conducted in accordance with weighted technical criteria described below. This evaluation produces a numerical score (points). Proposals will be evaluated to determine the offeror's ability to complete all technical requirements for performance. Offerors are advised that paramount consideration shall be given to the evaluation of technical proposals, rather than costs or price. To be selected for award, however, a proposal must be fairly and reasonably priced.

Technical proposals will be evaluated and weighted per the following criteria:

Understanding of MedPAC's overall needs: 30%

Technical responsiveness to the solicitation: 25%

Likelihood of proposed solution to result in improved reliability and performance of MedPAC's computer networks: 25%

Corporate qualifications, comparable experience, references, *et cetera*: 20%

Technical proposals will be reviewed first to determine which proposals received are technically acceptable and responsive to the solicitation. Those deemed technically acceptable will then be evaluated on the basis of their corresponding cost proposal.

We are currently planning to make an award under this solicitation by August 30, 2017, but such planning does not constitute a guarantee in this regard.