



SOLCITATION ADDENDUM

Issuing Agency:	Department of Adult Correction
Solicitation Number:	52-RFP-1437024364-CCG
Solicitation Description:	Locum Tenens Services
Solicitation Opening Date and Time:	March 10, 2025, at 2:00 PM ET
Addendum Number:	01
Addendum Date:	February 28, 2025
Purchasing Agent:	Crystal Carlson

Instructions: Vendor shall complete and return.

FAILURE TO RETURN THIS ADDENDUM SHALL SUBJECT YOUR RESPONSE TO REJECTION.

1. The following are questions received about the Solicitation and the State's response to those questions:

Question #	Vendor Question	State's Response
1	Is this a new contract or renewal of an existing contract?	New contract
2	If there is an existing contract, could you please share the names of the current vendors and their pricing?	See ATTACHMENT 1 at the end of this Addendum 01
3	What is the estimated budget for this contract?	Reference Section 1.0 PURPOSE AND BACKGROUND
4	Is it mandatory to subcontract?	Not mandatory
5	In order to be considered responsive for this solicitation, is it mandatory to bid on all positions?	Reference Section 4.1 PRICING
6	Is there a minimum number of hours required for the service?	Reference Section 1.0 PURPOSE AND BACKGROUND
7	I do not see any mention of an escalation clause. Is there an option for a rate increase each year as the market changes?	The escalation clause is not included in this solicitation. Reference Section 6.5 CONTRACT CHANGES
8	The RFP states invoices shall be submitted to the NCDAC Controller at the specified address. Will an email address(es) be provided or must invoices be mailed? Will invoices also be emailed to each individual facility for processing?	Reference Section 4.2 INVOICES
9	Will timesheets be submitted individually to each of the facilities for approval, or to one central location?	Reference Section 5.3 CLINICIAN RESPONSIBILITIES
10	What is the estimated number of HCPs needed for each discipline during a 1-year period?	Specific data not available

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
11	In selecting a candidate for a requested position, will the lowest priced qualified candidate be chosen from the group of selected Vendors?	Reference Section 5.1 VENDOR RESPONSIBILITIES
12	What type of uniform is the healthcare professional required to wear?	Business casual wear is acceptable
13	Will specific job needs come from each individual facility, or from one central person?	Reference Section 5.4 DEPARTMENT RESPONSIBILITIES
14	What is the turnaround time for approval from a candidate being submitted to a facility for a staffing need to the time the Contractor hears that the candidate is or is not accepted?	Reference Section 5.4 DEPARTMENT RESPONSIBILITIES
15	How many estimated overtime hours were in the last 3-year contract, per year?	Specific data not available.
16	Is the State looking to implement a Universal bill Rate for all line items in the Cost proposal, Attachment A, or will all awarded vendors have their own bill rates?	Undetermined at this time
17	Could you please share the incumbents and their pricing?	See ATTACHMENT 1 at the end of this Addendum 01
18	If we are an incumbent, are we allowed to bid?	Any vendor wishing to be considered for contract award under this solicitation must submit a proposal response.
19	Regarding The Clinician shall have: 1. Required yearly PPD in absence of no previous positive tuberculin skin test. If the Clinician is shown to have had a positive tuberculin skin test, documentation of treatment (INH) shall be provided, to include an x-ray within the past five (5) years and an Quanti-FERON testing yearly. PPD is not required for telehealth services. - Can the Department please clarify if they will accept one of the three testing above, versus requiring all 3 or multiple?	Question is unclear. Simply stated, must have annual PPD. If previously positive, will need proof of treatment (Ie "INH") and a chest x-ray in the last 5 years. For those who have been positive, they will require annual QuantiFERON testing (in lieu of PPD since previously positive).
20	Regarding section 2. Hepatitis B and Rubella Immunizations or Serologies are required - Would all Departments identify if they would accept either immunization or serologies?	Yes, either is acceptable.
21	Regarding Section 3.1, Method of Award: Will the NCDAC continue with a tiered structure for vendors?	Question is unclear
22	Regarding Section 3.1, Method of Award: Will pricing dictate this tiered structure?	Question is unclear
23	Regarding Section 4.3, Financial Stability: What documents will the Department accept for financial condition?	Reference Section 4.3 FINANCIAL STABILITY and Attachment G: CERTIFICATION OF FINANCIAL CONDITION
24	Regarding Section 4.4, HUB Participation: Is the HUB form and participation required?	Completion of the Attachment D form is required.
25	Regarding Section 4.4 HUB Participation: Is there a HUB goal in mind for the Department?	Refer to: https://www.doa.nc.gov/divisions/historically-underutilized-businesses-hub

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
26	Regarding Section 4.7, Background Checks: Agencies typically do preliminary non-formal vetting of provider backgrounds prior to interviews. The requirement of full background checks being conducted prior to a candidate interview with NC DAC can be prohibitive to timely fulfillment of vacancies as most providers will not submit to a background check until they have been formally offered a role. Would NC DAC be agreeable to change the full background requirement to be mandatory after a formal offer is made?	Reference Section 4.7 BACKGROUND CHECKS AND CREDENTIALING
27	Regarding Section 5.1, Vendor Responsibilities - Timely feedback: Would NCDAC be willing to add language to contract resulting from this solicitation agreeing to provide feedback on candidates submitted by agencies within 72 hours of initial submission when possible?	No
28	Regarding Section 5.1 Vendor Responsibilities - Is NCDAC willing to utilize the electronic timekeeping system of vendor agencies?	Reference Section 2.8 ALTERNATE PROPOSALS
29	Regarding Attachment I: Criminal History Record Check, can NCDAC confirm that vendors are to put only their name at the top right-hand corner and not to sign the document, as this document is to be provided with submitted candidates?	Per Section 4.7 BACKGROUND CHECKS AND CREDENTIALING, "The Department shall require all clinicians who are approved to work in the Department's facilities to undergo a local background check (DCI) and credentialing/privileging review BEFORE they are to report to their assigned work location."
30	Regarding Attachment D: HUB Supplemental Vendor Information, if vendor does not intend to utilize a HUB subcontractor, do vendors still have to sign and complete the form?	Reference Section 2.7 PROPOSAL CONTENTS Vendor shall complete Attachment D: HUB SUPPLEMENTAL VENDOR INFORMATION
31	Regarding Attachment D: HUB Supplemental Vendor Information - Can NCDAC confirm that the term Tier 2 supplier is in reference subcontractors to the prime vendor?	Please refer to https://www.doa.nc.gov/divisions/historically-underutilized-businesses-hub
32	Regarding Attachment G: Certification of Financial Condition - Can NCDAC confirm that no other documents are required to support financial condition, outside of the Certification of Financial Condition?	Reference Section 4.3 FINANCIAL STABILITY
33	Regarding Attachment G: Certification of Financial Condition - If documentation is required to support certification, can NCDAC please identify what documents would be accepted (e.g. 3rd Party Audited Financials, etc.)?	Reference Section 4.3 FINANCIAL STABILITY
34	Regarding Attachment F: Location of Workers Utilized by Vendor - Can NCDAC confirm that this document is in direct relation to the request for telehealth services?	Reference Section 3.5 PERFORMANCE OUTSIDE THE UNITED STATES
35	Regarding Attachment F: Location of Workers Utilized by Vendor - Will NCDAC accept responses from vendors with workers supporting this program that are outside of the United States?	Reference Section 3.5 PERFORMANCE OUTSIDE THE UNITED STATES
36	Regarding Attachment F: Location of Workers Utilized by Vendor - Will preference be given to vendors that have a domestic-based response?	Reference Section 3.5 PERFORMANCE OUTSIDE THE UNITED STATES
37	Regarding Attachment F: Location of Works Utilized by Vendor - Are vendors required to response to Notes 1-3 of the attachment in the overall technical response? If so, can NCDAC please identify what section vendors will need to incorporate this information in?	Question is unclear

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
38	Regarding Attachment E: Customer Reference Template - Can NCDAC confirm if vendors can utilize NCDAC as a reference?	It is not prohibited nor required under the RFP.
39	Regarding Attachment E: Customer Reference Template - Can NCDAC identify if vendors are allowed to provide more than three (3) references?	Reference Section 4.6 REFERENCES
40	Regarding Attachment E: Customer Reference Template - Can NCDAC identify what other factors, if any, would be reviewed for "best value" in references?	Reference Section 3.4 EVALUATION CRITERIA
41	Regarding Attachment E: Customer Reference Template - Can NCDAC identify if vendors provided more than three (3) references, if additional references will be considered in evaluator review?	Reference Section 3.4 EVALUATION CRITERIA
42	Regarding Attachment C: North Carolina General Terms & Conditions - Can NCDAC confirm that this document is not required to be signed and provided within the submission packet?	Reference Section 4.7 PROPOSAL CONTENTS
43	Regarding Attachment C: North Carolina General Terms & Conditions - Is the state willing to consider revisions/exceptions?	Reference Section 2.3 NOTICE TO VENDORS REGARDING RFP TERMS AND CONDITIONS
44	Regarding Attachment C: North Carolina General Terms & Conditions - To what extent will revisions/exceptions impact proposal scoring and award decisions?	Reference Section 2.3 NOTICE TO VENDORS REGARDING RFP TERMS AND CONDITIONS
45	Regarding Attachment C: North Carolina General Terms & Conditions - What security measures does the state have in place at the correctional facilities where our staff could potentially be assigned?	Security staffing and procedures vary according to the facility security level and are the same for all staff
46	Regarding Attachment C: North Carolina General Terms & Conditions - Is the state receptive to the prospect of mutual termination rights?	No
47	Regarding Attachment C: North Carolina General Terms & Conditions - Is the state receptive to the prospect of rate and price increases where unexpected market forces make this a necessary consideration?	Reference Section 6.5 CONTRACT CHANGES
48	Regarding Attachment C: North Carolina General Terms & Conditions - What is the managerial and supervisory structure in place relative to staff we would assign to county facilities?	Agency staff will report to the facility clinician supervisor or facility designee.
49	Regarding Attachment C: North Carolina General Terms & Conditions - What are the insurance coverages, and coverage limits, mandated by the state	Reference NORTH CAROLINA GENERAL TERMS AND CONDITIONS; Reference Section 5.1 VENDOR RESPONSIBILITIES
50	Regarding Attachment C: North Carolina General Terms & Conditions - Is the state receptive to Net 30 payment terms?	Reference NORTH CAROLINA GENERAL TERMS AND CONDITIONS #9
51	Regarding Attachment C: North Carolina General Terms & Conditions - Are vendors required to use HUBs for purposes of subcontracting?	Not mandatory. Reference Section 4.4 HUB PARTICIPATION

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
52	Regarding Section 2.7, Proposal Submission: Can NCDAC please confirm the layout in which they would like to see the technical proposal that includes Section 4, and further subsection 4.5?	Reference Section 2.7 PROPOSAL CONTENTS Reference Section 3.4 EVALUATION CRITERIA Reference Section 4.5 VENDOR EXPERIENCE
53	Do you anticipate your current staffing volume to change in the next year or two years? For example, do you expect any significant changes or projects starting, etc?	Reference Section 1.0 PURPOSE AND BACKGROUND
54	How many patients per day do you estimate the provider would see?	Reference Section 1.0 PURPOSE AND BACKGROUND
55	Please provide a forecast for the number of Locum tenens service hours utilized for the term of the contract (by labor category if possible)	Reference Section 1.0 PURPOSE AND BACKGROUND
56	Based on historical usage, how long was the typical Locum tenens assignment (by labor category if possible)? And is the same assignment length anticipated during this contract term?	This will vary and is not easily predicted.
57	What is the expected time for the completion of credentialing for an accepted candidate?	Credentialing is completed in a timely manner
58	Under any circumstances will the clinicians be required to drive throughout their work-day?	Reference Section 5.3 CLINICIAN RESPONSIBILITIES
59	If clinicians are required to drive as part of their normal clinical practice (mobile practice), will they utilize a state owned vehicle, or their own personal vehicle?	Clinicians are expected to use their personal vehicle
60	What is the current annual spend associated with the requested services today?	Reference Section 1.0 PURPOSE AND BACKGROUND
61	What is the anticipated future annual spend associated with the services under this contract?	Reference Section 1.0 PURPOSE AND BACKGROUND
62	How many FTEs (36-40 hours) does the Department anticipate utilizing under this contract?	Reference Section 1.0 PURPOSE AND BACKGROUND
63	Who are the incumbent vendors currently contracted to provide requested services?	See attachment at the end of this Addendum 01
64	What are the current rates for services outlined in this RFP?	See attachment at the end of this Addendum 01
65	On what date does the current contract expire for the services outlined in this RFP?	Current contract expires 4/30/2025
66	Is it the Department's intent to secure all services via 1099/Independent contractor clinicians?	Question is unclear
67	Is a sample agreement available for review OR are all the sampterms/conditions addressed within the RFP?	Question is unclear
68	What are the current challenges/obstacles in meeting Locum Tenen needs for individuals served via the Department today?	Not applicable to this solicitation
69	The RFP states that vendors may bid on all clinician categories listed in Attachment A or may bid only on one or more individual clinician categories. Are vendors that pursue only one or more individual clinician categories at a disadvantage in terms of award criteria?	Reference Section 3.4 EVALUATION CRITERIA Reference Section 4.1 PRICING

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
70	Are pricing adjustments acceptable for renewal / option years?	Reference Section 6.5 CONTRACT CHANGES
71	Is it the Departments plan to create a standardized rate for each service offering for all awarded vendors OR will there be variability in pricing based upon individual awards?	Undetermined at this time
72	Section A - #2 states that Medical malpractice insurance coverage in the amount of \$1 million per incident and \$3 million in the aggregate, covering the clinician engaged in any work under the contract. Our company holds a general liability policy that provides coverage in the amount of \$ 1 million per incident and \$3 million in the aggregate. Are you stating that all clinicians even Midlevel clinicians are required to have an additional Medical malpractice insurance coverage plan in addition to the general liability policy that covers our staff today?	Reference Section 5.2 QUALIFICATIONS AND REQUIREMENTS OF CLINICIANS PERFORMING SERVICES
73	Who are the current vendors supplying these services and what are the current rates?	See attachment at the end of this Addendum 01
74	Will current contracts with the Department of Adult Correction continue to be extended as an award and new contracts from this RFP are negotiated and executed?	Current contract expires 4/30/2025.
75	Will there be any preference given to vendors who can bid on all categories listed on Attachment A?	Reference Section 3.4 EVALUATION CRITERIA Reference Section 4.1 PRICING
76	Does the E-Procurement fee apply to this solicitation?	Reference Section 2.2 E-PROCUREMENT FEE
77	How many current locums are on contract in NC Facilities?	Specific data not available
78	Since the duties of the Contractor/Vendor and the Clinician are separate and distinct, especially as Contractor/Vendor does not itself provide medical services, it is important that Clinician not be incorporated into the definition of Contractor/Vendor – Can this be included in a potential contract?	No, the requirements are stated for the vendors to use in seeking the clinical services of their providers
79	Is the State willing to negotiate terms within the North Carolina General Terms & Conditions?	Reference Section 2.3 NOTICE TO VENDORS REGARDING NORTH CAROLINA GENERAL TERMS AND CONDITIONS and Section 2.8 Alternate Proposals
80	Is the State willing to negotiate terms within this RFP and attachments?	Reference Section 2.3 NOTICE TO VENDORS REGARDING NORTH CAROLINA GENERAL TERMS AND CONDITIONS and Section 2.8 Alternate Proposals
81	May be submit exceptions or redlines to the terms within this RFP and the North Carolina General Terms & Conditions?	Reference Section 2.3 NOTICE TO VENDORS REGARDING NORTH CAROLINA GENERAL TERMS AND CONDITIONS
82	Will awardees be allowed an opportunity to negotiate the terms of the contract prior to signing?	Reference Section 2.3 NOTICE TO VENDORS REGARDING NORTH CAROLINA GENERAL TERMS AND CONDITIONS
83	If awarded, should there be terms we are unable to accept, is there a penalty for not signing a contract?	Reference Section 2.3 NOTICE TO VENDORS REGARDING NORTH CAROLINA GENERAL TERMS AND CONDITIONS
84	For the last year, can you break down the utilization history (total staffing hours and spend) for each position identified in this RFP?	Specific data not available
85	Is the State required to utilize HUB vendors?	Reference Section 4.4 HUB PARTICIPATION

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
86	Will we be penalized if we are not a HUB vendor or penalized for not utilizing HUBs as subcontractors?	Reference Section 4.4 HUB PARTICIPATION
87	May we add a locums to perm conversion fee to our pricing?	No. Reference Section 4.1 PRICING
88	May we add a buyout fee to our pricing?	No. Reference Section 4.1 PRICING
89	What is the States process for buyout or seeking to take on a clinician to a permanent role?	Not applicable to this solicitation
90	Will price adjustments be allowed for the renewal years?	Reference Section 6.5 CONTRACT CHANGES
91	Will Bios suffice for all support staff that will be assigned to this Contract?	Question is not clear
92	Regarding subbing out key personnel, is this reference to our support staff from the staffing agency or the Clinicians that we place on assignment?	Reference Section 4.8 PERSONNEL
93	Can the State provide an approved template for the Monthly Assignment Status Reports?	Yes, upon award
94	Clinicians are independent contractors of the Vendor/Contractor and do not qualify for benefits. Can this language be amended?	No
95	Clinicians are independent contractors of the Vendor/Contractor and do not qualify for workers compensation benefits. Can this language be amended?	No
96	Will the State pay for any overtime hours or holiday shifts worked?	Reference Section 5.1 VENDOR RESPONSIBILITIES and revised language in number 2 of this Addendum 01.
97	If the State will not pay for any overtime hours or holiday shifts can the Vendors decline to staff those dates or can the Providers decline to work those dates?	No
98	What is the State's justification for passing the overtime and holiday expense onto Contractors/Vendors?	See revised language in number 2 of this Addendum 01.
99	Will telehealth only be performed by the Clinicians at a State facility?	Reference Section 5.3 CLINICIAN RESPONSIBILITIES
100	Will Providers need to be at one of your locations to provide services? Or will they be able to provide services from any remote location?	Reference Section 5.3 CLINICIAN RESPONSIBILITIES
101	Will the State provide telehealth equipment?	Reference Section 5.3 CLINICIAN RESPONSIBILITIES
102	Will background checks be an expense covered by the State?	Yes
103	What is the expected time for the completion of credentialing for an accepted candidate?	Reference Section 4.7 BACKGROUND CHECKS AND CREDENTIALING
104	Can this definition of Clinician be considered? CLINICIAN: A medical doctor, doctor of osteopathy, psychiatrist, family nurse practitioner/physician's assistant, social worker, or psychologist presented as an independent contractor by the Vendor. As an independent contractor, Clinician is not an employee, agent or subcontractor of Vendor.	Reference Section 2.9 DEFINITIONS, ACRONYMS AND ABBREVIATIONS
105	Do you provide debriefing for non-awarded bidders?	No
106	Section 2.2 - Will The State of NC accept redlines to your General Terms and Conditions as part of our Proposal Response?	Reference Section 2.3 NOTICE TO VENDORS REGARDING NORTH CAROLINA GENERAL TERMS AND CONDITIONS

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Question #	Vendor Question	State's Response
107	Section 4.4 - Please confirm whether the HUB Participation requirement is mandatory for this engagement or just encouraged to meet or exceed.	Not mandatory. Reference Section 4.4 HUB PARTICIPATION
108	Section 4.4 – Can we fill diverse spend at 10% or more and work to build a HUB network?	Question is not clear
109	In section 4.10 – it mentions a contract value in excess of \$1,000,000.00. Can you provide historical and or anticipated utilization by specialty?	Specific data not available
110	Section 2.9 A- You define clinicians all as independent contractors, however if a vendor employs their licensed clinical social works, will that be accepted?	Clinicians provided under this contract will not be state employees.
111	Are we allowed to submit exceptions to the Terms and Conditions for this bid in our proposal?	Reference Section 2.3 NOTICE TO VENDORS REGARDING RFP TERMS AND CONDITIONS

2. The Solicitation is hereby modified as follows:

Modification #	Solicitation Section	Current Solicitation Language	Updated Solicitation Language
1	5.1 (K)	The Vendor shall be responsible for any overtime or holiday payments due to any person employed by the Vendor who is providing services under this contract. In addition, the Vendor agrees that the Vendor is responsible for any worker's compensation payments to which any employee providing services under this Contract may be found to be entitled. The Vendor agrees that if the Department is found to be liable for any overtime, holiday, or worker's compensation payments that the Vendor will reimburse the Department for any such liability.	The Vendor shall be responsible for any overtime or holiday payments due to any person employed by the Vendor who is providing services under this contract. <u>The Department will not reimburse any additional amount for overtime, holidays, worker's compensation, or insurance. The hourly rates provided shall be all inclusive. Any hours that would be considered overtime or holiday would be billed at the regular hourly rate.</u> In addition, the Vendor agrees that the Vendor is responsible for any worker's compensation payments to which any employee providing services under this Contract may be found to be entitled. The Vendor agrees that if the Department is found to be liable for any overtime, holiday, or worker's compensation payments, that the Vendor will reimburse the Department for any such liability.
2	Attachment A, paragraph 2	The Vendor shall be responsible for any overtime or holiday payments due to any person employed by the Vendor who is providing services under this contract. In addition, the Vendor agrees that the Vendor is responsible for any worker's compensation payments to which any employee providing services under this Contract may be found to be entitled. The Vendor agrees that if the Department is found to be liable for any overtime, holiday, or worker's compensation payments that the Vendor will reimburse the Department for any such liability.	The Vendor shall be responsible for any overtime or holiday payments due to any person employed by the Vendor who is providing services under this contract. <u>The Department will not reimburse any additional amount for overtime, holidays, worker's compensation, or insurance. The hourly rates provided shall be all inclusive. Any hours that would be considered overtime or holiday would be billed at the regular hourly rate.</u> In addition, the Vendor agrees that the Vendor is responsible for any worker's compensation payments to which any employee providing services under this Contract may be found to be entitled. The Vendor agrees that if the Department is found to be liable for any overtime, holiday, or worker's compensation payments, that the Vendor will reimburse the Department for any such liability.

SOLICITATION NUMBER: 52-RFP-1437024364-CCG
ADDENDUM NUMBER: 01

Attachment 1:

19-RFP-015505-BET Locum Tenens

AWARDED VENDORS PRICING

3rd year Effective February 29, 2024 - February 28, 2025 (extended through 4/30/2025)

Categories		22nd Century	AB Staffing Solutions - new pricing 8/17/23	Adelphi Medical Staffing - new pricing 2/29/2024	Catapult	Cell Staff	Consilium	Health Advocates Network dba Staff Today	Healthcare Staffing Professionals	Jackson & Coker - new pricing 2/29/2024	Locum Inc dba Medstaff National Medical Staffing	LocumTenens .com - new pricing 2/29/2024	Maxim 2/29/2024	Medical Doctor Assoc. dba Cross Country Locums - new pricing 2/29/2024	Monterey Consultants	National Health Care Solutions LLC - new pricing 2/29/2024	Premier Physician Services	Spectrum
Primary	On-Site Hourly Rate	\$135.00		\$178.50			\$194.00	\$169.00	\$158.00	\$173.06		\$179.14	\$165.44	\$173.71	\$157.25	\$178.60	\$160.00	\$160.00
	On Call Hourly Rate Weekdays	\$15.00		\$15.75			\$21.00	\$30.00	\$17.00	\$18.38		\$15.51	\$51.70	\$7.00	\$17.00	\$13.57	\$15.00	\$10.00
	On Call Hourly Rate Weekends	\$15.00		\$21.00			\$29.00	\$40.00	\$20.00	\$18.38		\$15.51	\$51.70	\$10.00	\$22.00	\$16.29	\$15.00	\$12.00
	Telehealth Hourly Rate	\$140.00		\$162.75			\$162.00	\$159.00	\$142.00	\$173.06		\$179.14	\$149.93	\$145.00	\$155.71	\$167.74	\$160.00	\$150.00
Mid-Level Clinicians MEDICAL	On-Site Hourly Rate	\$105.00	\$154.50	\$126.00		\$115.00	\$149.00	\$118.75	\$110.00			\$127.03	\$118.91	\$118.91	\$114.26	\$130.01	\$120.00	\$130.00
	On Call Hourly Rate Weekdays	\$15.00	\$15.00	\$10.50		\$10.00	\$18.00	\$20.00	\$12.00			\$10.34	\$31.02	\$7.00	\$12.50	\$10.86	\$15.00	\$10.00
	On Call Hourly Rate Weekends	\$15.00	\$15.00	\$15.75		\$10.00	\$27.00	\$25.00	\$16.00			\$10.34	\$31.02	\$10.00	\$15.00	\$13.57	\$15.00	\$12.00
	Telehealth Hourly Rate	\$110.00	\$120.00	\$115.50		\$115.00	\$125.00	\$96.77	\$100.00			\$127.03	\$103.40	\$110.00	\$112.50	\$123.50	\$120.00	\$125.00
Mid-Level Clinicians PSYCHIATRY	On-Site Hourly Rate			\$126.00		\$120.00	\$164.00	\$128.00	\$115.00	\$189.29	\$145.00	\$162.86	\$155.10	\$129.25		\$130.01	\$140.00	\$160.00
	On Call Hourly Rate Weekdays			\$10.50		\$10.00	\$30.00	\$20.00	\$12.00	\$18.38	\$21.00	\$15.51	\$46.53	\$15.00		\$10.86	\$15.00	\$10.00
	On Call Hourly Rate Weekends			\$15.75		\$10.00	\$30.00	\$25.00	\$16.00	\$18.38	\$21.00	\$15.51	\$46.53	\$15.00		\$13.57	\$15.00	\$12.00
	Telehealth Hourly Rate			\$162.75		\$120.00	\$145.00	\$103.00	\$110.00	\$162.26	\$131.00	\$162.86	\$134.42	\$120.00		\$123.50	\$140.00	\$150.00
Psychiatrists	On-Site Hourly Rate	\$150.00		\$257.25			\$284.00	\$259.00	\$249.00	\$281.24	\$293.00	\$268.17	\$268.84	\$253.33		\$270.34	\$225.00	\$210.00
	On Call Hourly Rate Weekdays	\$25.00		\$15.75			\$35.00	\$30.00	\$25.00	\$27.04	\$37.00	\$25.85	\$67.21	\$15.00		\$16.29	\$25.00	\$25.00
	On Call Hourly Rate Weekends	\$25.00		\$21.00			\$35.00	\$40.00	\$20.00	\$37.85	\$37.00	\$31.02	\$67.21	\$20.00		\$21.71	\$30.00	\$30.00
	Telehealth Hourly Rate	\$155.00		\$241.50			\$261.00	\$222.00	\$220.00	\$237.96	\$241.00	\$249.71	\$242.99	\$200.00		\$244.28	\$225.00	\$200.00
Psychologists	On-Site Hourly Rate	\$104.00	\$144.20	\$114.00			\$135.00	\$120.00	\$110.00			\$114.00	\$108.57	\$98.23	\$105.92	\$123.77	\$110.00	\$140.00
	On Call Hourly Rate Weekdays	\$20.00	\$15.00	\$10.86			\$20.00	\$20.00	\$12.00			\$15.51	\$20.68	\$15.00	\$15.25	\$10.86	\$20.00	\$10.00
	On Call Hourly Rate Weekends	\$20.00	\$15.00	\$16.29			\$20.00	\$30.00	\$16.00			\$20.68	\$20.68	\$20.00	\$18.25	\$13.57	\$20.00	\$12.00
	Telehealth Hourly Rate	\$100.00	\$120.00	\$103.14			\$125.00	\$100.00	\$100.00			\$114.00	\$93.06	\$90.00	\$103.17	\$111.28	\$110.00	\$125.00
LCSW	On-Site Hourly Rate	\$50.00	\$100.94	\$73.50	\$82.43	\$74.80		\$72.00	\$70.00				\$77.55			\$86.31	\$72.00	\$89.00
	Telehealth Hourly Rate	\$55.00	\$78.00	\$73.50	\$87.43	\$74.80		\$60.00	\$60.00				\$67.21			\$78.17	\$72.00	\$85.00

Check **ONLY ONE** of the following options and return one properly executed copy of this Addendum prior to the Solicitation opening time and date.

- ☐ A response was submitted prior to this Addendum. An updated response has been submitted to address the changes resulting from this Addendum.
- ☐ A response was submitted prior to this Addendum. **NO CHANGES** have **resulted** from this Addendum.
- ☐ A response was **not** submitted prior to this Addendum. **ANY CHANGES** **resulting** from this Addendum are included in our response.

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

Authorized Signature

Date

Printed Name

Title