

STATE OF OHIO
DEPARTMENT OF ADMINISTRATIVE SERVICES
GENERAL SERVICES DIVISION
OFFICE OF PROCUREMENT SERVICES
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395

AMENDMENT FOR CHANGE
AMENDMENT NO. 4

TO: LIMITED DISTRIBUTION - DEPARTMENT OF MENTAL HEALTH (DMH), (CAMBRIDGE ONLY)

FROM: HUGH QUILL, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES

SUBJECT: TERM CONTRACT - Food Service Management and Patient Food Service for Ohio Department of Mental Health (ODMH) Facilities and Ohio Department of Mental Retardation and Developmental Disabilities (ODMRDD) (Cambridge Only)

Attached are pages 2, 3, 4, 9, 10, 11, 12, 13, & 14 to this contract. Remove these pages from the existing contract and replace with the attached pages on the effective and/or revision date.

This amendment is issued to change the number of ODMH facilities and redistribute the food service requirements effective July 1, 2008, and change Contractor point of contact information.

All other prices, terms and conditions remain unchanged.

Questions regarding this Amendment and/or the Requirements Contract may be directed to:

Dana L. King
dana.king@das.state.oh.us

This Amendment, the main Requirements Contract and any additional amendments thereto are available from the DAS Web site at the following address:



<http://www.ohio.gov/procure>

Affected Contractor(s):

Morrison Healthcare Food Services
5801 Peachtree Dunwoody Road
Atlanta, GA 30342

NickRomagnano@lamMorrison.com
MicheleFairchild@lamMorrison.com

Food Service Management and Patient Food Service for ODMH Facilities and ODMRDD (Cambridge Only)

CONTRACTOR: MORRISON FOOD SERVICERFP RESPONSE CLARIFICATIONS AND MODIFICATIONS:

1. The Contractor agrees that it will take the necessary steps to ensure the orderly transfer of ownership of the food delivery equipment acquired by the Contractor and amortized through this Contract for the purposes of performance of this Contract. The Contractor further agrees that it will provide for the transfer of title of the equipment as well as providing any applicable warranty to ODMH. Finally, the Contractor agrees that it will be responsible for delivery or transfer of any of the above-referenced equipment to a location as determined by the ODMH within the state of Ohio.
2. Cost of equipment and extended warranties, if applicable, shall be amortized/reflected over the initial three (3) year term.
3. The Contractor shall provide current licensure and health inspections for all nine (9) facilities within 30 days of contract award.

* Effective July 1, 2008, the Contractor shall ensure current licensure and health inspections for the seven (7) open facilities throughout the term of the Contract.

ESTIMATED ANNUAL TOTAL COSTS - ALL FACILITIES

		INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
DESCRIPTION	ESTIMATED NO. OF SERVINGS PER MEAL/ SNACK	July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
*ATHENS	*27,375 12,410	\$184,909.00	\$190,121.20	*\$431,703.75 \$195,705.70	*\$448,675.25 \$203,399.90	*\$462,050.00 \$209,480.80
*CAMBRIDGE	0 44,965	\$222,978.50	\$229,263.80	0 \$235,998.05	0 \$245,276.35	0 \$252,609.20
CaDC	41,245	\$614,550.50	\$631,873.40	\$650,433.65	\$676,005.55	\$696,215.60
HEARTLAND	43,435	\$566,392.40	*\$582,680.53 \$643,415.69	*\$598,968.65 \$659,703.84	\$623,292.25	\$641,969.30
CLEVELAND	43,800	\$612,634.98	\$629,716.98	\$646,798.98	\$652,182.00	\$671,016.00
NORTHFIELD	67,525	\$1,040,418.45	\$1,064,727.45	\$1,091,062.20	\$964,932.25	\$991,942.25
TOLEDO	41,610 32,120	\$477,277.50	\$490,767.90	*\$633,720.30 \$504,258.30	*\$658,270.20 \$508,138.40	*\$678,659.10 \$523,877.20
SUMMIT	104,755 90,155	\$1,252,947.14	\$1,288,107.59	*\$1,523,137.70 \$1,325,972.69	*\$1,581,800.50 \$1,361,340.50	*\$1,629,987.80 \$1,402,811.80
COLUMBUS	79,935 67,525	\$972,920.46	*\$999,255.21 \$999,252.24	*\$1,099,905.60 \$1,023,564.24	*\$1,144,669.20 \$966,958.00	*\$1,176,643.20 \$993,968.00
DAYTON	0 36,500	\$473,770.00	\$507,364.60	0 \$521,599.60	0 \$521,585.00	0 \$536,185.00
*TOTAL ESTIMATED ANNUAL COST		*\$6,418,798.93 \$6,418,699.93	*\$6,614,875.66 \$6,674,613.82	*\$6,675,730.83 \$6,794,362.03	*\$5,326,828.20 \$6,723,110.20	*\$6,948,523.25 \$6,920,075.15

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008.

Oaks Item ID: 9622

APPALACHIAN BEHAVIORAL HEALTHCARE - ATHENS CAMPUS

		INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
DESCRIPTION	ESTIMATED NO. OF MEALS ANNUALLY	July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
BREAKFAST	27,375 42,410	\$4.78	\$4.92	\$5.07	\$5.27	\$5.43
LUNCH	27,375 42,410	\$4.78	\$4.92	\$5.07	\$5.27	\$5.43
DINNER	27,375 42,410	\$4.78	\$4.92	\$5.07	\$5.27	\$5.43
SNACK	27,375 42,410	\$0.56	\$0.56	\$0.56	\$0.58	\$0.59
NUTRIENT SUPPLEMENT		10%	10%	10%	10%	10%
FLOOR STOCKS		10%	10%	10%	10%	10%
SPECIAL EVENTS		10%	10%	10%	10%	10%
EQUIPMENT AMORTIZATION and EXTENDED WARRANTIES (IF APPLICABLE)		\$0.0000	\$0.0000	\$0.0000		
ANNUAL MEAL & SNACK COST (including amortized equipment)		\$184,909.00	\$190,121.20	*\$431,703.75 \$195,705.70	*\$448,676.25 \$203,399.90	*\$462,090.00 \$209,480.80

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008.

* Oaks Item ID: 6256

APPALACHIAN BEHAVIORAL HEALTHCARE - CAMBRIDGE CAMPUS

		INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
DESCRIPTION	ESTIMATE D NO. OF MEALS ANNUALLY	July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
		BREAKFAST	14,965	\$4.78	\$4.92	\$0.00
LUNCH	14,965	\$4.78	\$4.92	\$0.00	\$0.00	\$0.00
DINNER	14,965	\$4.78	\$4.92	\$0.00	\$0.00	\$0.00
SNACK	14,965	\$0.56	\$0.56	\$0.00	\$0.00	\$0.00
NUTRIENT SUPPLEMENT		10%	10%	\$0.00	\$0.00	\$0.00
FLOOR STOCKS		10%	10%	\$0.00	\$0.00	\$0.00
SPECIAL EVENTS		10%	10%	\$0.00	\$0.00	\$0.00
EQUIPMENT AMORTIZATION and EXTENDED WARRANTIES (IF APPLICABLE)		\$0.0000	\$0.0000	\$0.00	-	-
ANNUAL MEAL & SNACK COST (including amortized equipment)		\$222,978.50	\$229,263.80	*\$0	\$0	\$0

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements – Cambridge Facility Closed, effective July 1, 2008.

*Oaks Item ID: 4547

NORTHCOAST BEHAVIORAL HEALTHCARE - TOLEDO CAMPUS

DESCRIPTION	ESTIMATED NO. OF MEALS ANNUALLY	INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
		July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
BREAKFAST	*41,610 32,120	\$4.61	\$4.75	\$4.89	\$5.08	\$5.24
LUNCH	*41,610 32,120	\$4.61	\$4.75	\$4.89	\$5.08	\$5.24
DINNER	*41,610 32,120	\$4.61	\$4.75	\$4.89	\$5.08	\$5.24
SNACK	*41,610 32,120	\$0.56	\$0.56	\$0.56	\$0.58	\$0.59
NUTRIENT SUPPLEMENT		10%	10%	10%	10%	10%
FLOOR STOCKS		10%	10%	10%	10%	10%
SPECIAL EVENTS		10%	10%	10%	10%	10%
EQUIPMENT AMORTIZATION and EXTENDED WARRANTIES (IF APPLICABLE)		\$0.1564	\$0.1564	\$0.1564		
ANNUAL MEAL & SNACK COST (including amortized equipment)		\$477,277.50	\$490,767.90	*\$633,720.30 \$504,258.30	*\$658,270.20 \$508,138.40	*\$678,659.10 \$523,877.20

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008.

Oaks Item ID: 9625

SUMMIT BEHAVIORAL HEALTHCARE

		INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
DESCRIPTION	ESTIMATED NO. OF MEALS ANNUALLY	July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
		BREAKFAST	*104,755 90,155	\$4.39	\$4.52	\$4.66
LUNCH	*104,755 90,155	\$4.39	\$4.52	\$4.66	\$4.84	\$4.99
DINNER	*104,755 90,155	\$4.39	\$4.52	\$4.66	\$4.84	\$4.99
SNACK	*104,755 90,155	\$0.56	\$0.56	\$0.56	\$0.58	\$0.59
NUTRIENT SUPPLEMENT		10%	10%	10%	10%	10%
FLOOR STOCKS		10%	10%	10%	10%	10%
SPECIAL EVENTS		10%	10%	10%	10%	10%
EQUIPMENT AMORTIZATION and EXTENDED WARRANTIES (IF APPLICABLE)		\$0.0559	\$0.0559	\$0.0559		
ANNUAL MEAL & SNACK COST (including amortized equipment)		\$1,252,947.14	\$1,288,107.59	*\$1,523,137.70 \$1,325,972.69	*\$1,581,800.50 \$1,361,340.50	*\$1,629,987.80 \$1,402,811.80

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008.

Oaks Item ID: 4548

TWIN VALLEY BEHAVIORAL HEALTHCARE - COLUMBUS CAMPUS

		INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
DESCRIPTION	ESTIMATED NO. OF MEALS ANNUALLY	July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
		BREAKFAST	* 79,935 67,525	\$4.15	\$4.28	\$4.40
LUNCH	* 79,935 67,525	\$4.15	\$4.28	\$4.40	\$4.58	\$4.71
DINNER	* 79,935 67,525	\$4.15	\$4.28	\$4.40	\$4.58	\$4.71
SNACK	* 79,935 67,525	\$0.56	\$0.56	\$0.56	\$0.58	\$0.59
NUTRIENT SUPPLEMENT		10%	10%	10%	10%	10%
FLOOR STOCKS		10%	10%	10%	10%	10%
SPECIAL EVENTS		10%	10%	10%	10%	10%
EQUIPMENT AMORTIZATION and EXTENDED WARRANTIES (IF APPLICABLE)		\$0.4661	\$0.4661	\$0.4661		
ANNUAL MEAL & SNACK COST (including amortized equipment)		\$972,920.46	\$999,255.21	*\$1,099,905.60 \$1,023,564.21	*\$1,144,669.20 \$966,958.00	*\$1,176,643.20 \$993,968.00

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008.

Oaks Item ID: 9626

TWIN VALLEY BEHAVIORAL HEALTHCARE - DAYTON CAMPUS

		INITIAL CONTRACT YEARS			OPTIONAL RENEWAL YEARS	
DESCRIPTION	ESTIMATED NO. OF MEALS ANNUALLY	July 1, 2006 - June 30, 2007	July 1, 2007 - June 30, 2008	July 1, 2008 - June 30, 2009	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011
		BREAKFAST	36,500	\$4.14	\$4.26	\$0.00
LUNCH	36,500	\$4.14	\$4.26	\$0.00	\$0.00	\$0.00
DINNER	36,500	\$4.14	\$4.26	\$0.00	\$0.00	\$0.00
SNACK	36,500	\$0.56	\$0.56	\$0.00	\$0.00	\$0.00
NUTRIENT SUPPLEMENT		10%	10%	\$0.00	\$0.00	\$0.00
FLOOR STOCKS		10%	10%	\$0.00	\$0.00	\$0.00
SPECIAL EVENTS		10%	10%	\$0.00	\$0.00	\$0.00
EQUIPMENT AMORTIZATION and EXTENDED WARRANTIES (IF APPLICABLE)		0	\$0.1868	\$0.00	-	-
ANNUAL MEAL & SNACK COST (including amortized equipment)		\$473,770.00	\$507,364.60	*\$0.00	*\$0.00	*\$0.00

* Indicates reference to change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008.

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

105138

Morrison Healthcare Food Services
5801 Peachtree Dunwoody Road
Atlanta, GA 30342

CONTRACT NO.: CSP904105-2 (06/30/09)

TERMS: Net 30 Days

* CONTRACTOR'S CONTACT:

Primary:

Nick Romagnano, Regional Director Operations
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Bolingbrook, IL 60440

Telephone: (630) 771-4314

FAX: (630) 771-4306

e-mail: NickRomagnano@IamMorrison.com

Secondary (Contract Office):

Michele Fairchild, Regional Vice President
Morrison Healthcare Food Services
530 West North Frontage Rd., Suite A
Bolingbrook, IL 60440

Telephone: (630) 771-4314

FAX: (630) 771-4306

e-mail: MicheleFairchild@IamMorrison.com

PAYMENT ADDRESS:

Morrison Healthcare Food Services
P.O. Box 102289
Atlanta, GA 30368-2289

*Indicates change in Contractor point of contact information effective December 5, 2008.

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
4	12/19/08	To indicate change in the number of ODMH facilities and redistribution of food service requirements effective July 1, 2008, and change Contractor point of contact information.
3	08/16/07	Correct contract number on last page of the original Contract.
2	9/13/06	To publish a revised point of contact for Contractor.
1	06/27/06	Clarification of issues and revise summary breakdown.