INVITATION TO BID

State of Ohio
Department of Administrative Services
General Services Division
Office of Procurement Services

The Original Signed Bid must be submitted to the Office of Procurement Services to receive consideration for award.	BIDDER NAME
BID NUMBER: OT900517 / OPENING DATE (1:00 p.m.): April 20, 2016	STREET ADDRESS ☐ Check if remit address is different and list on separate sheet
	CITY / STATE / ZIP
General Services Division Office of Procurement Services 4200 Surface Road Columbus, OH 43228-1395 Attn: Bid Desk	COUNTY / MBE/EDGE CERTIFICATE NUMBER
	TELEPHONE NO. ( ) / TOLL FREE NO. 1 - ( )
	CONTACT PERSON / FAX NO. ( )
REQ./INDEX NO. LDC001 / BID NOTICE DATE 3/30/16	CONTRACTOR'S E-MAIL ADDRESS

SELECT YOUR PREFERRED METHOD OF RECEIVING PURCHASE ORDERS AND ENTER THE E-MAIL OR FAX NUMBER INFORMATION (ONLY SELECT ONE METHOD)

☐ E-Mail ☐ Fax

In addition to the standard terms for payment, the payment terms for state agency(ies) will be 2%,10 Days, Net 30 Days unless otherwise stated in the following space. If no discount is offered, bidder should circle "Net 30 Days". _____%, ____Days, Net 30 Days

PARTICIPATING AGENCY(IES): Ohio Department of Mental Health and Addiction Services, Ohio Department of Rehabilitation and Correction, and Ohio Department of Youth Services

THE DEPARTMENT OF ADMINISTRATIVE SERVICES, OFFICE OF PROCUREMENT SERVICES, IS SOLICITING BIDS FOR:

MOBILE RADIOLOGY SERVICES

TERM OF CONTRACT: This Invitation to Bid is to establish a requirements contract to procure the described supplies or services on behalf of the above participating agency(ies). The agency(ies) may place orders against the Contract beginning 06/01/2016 or upon the date when DAS signs the Contract, whichever is later in time. The Contract will expire 05/31/2019 unless DAS terminates the Contract based upon reasons set forth in Article I-C of the Standard Contract Terms and Conditions. No agencies may place purchase orders against the Contract beyond the expiration date unless DAS renews the Contract by amendment. The Contractor may begin performance under the Contract only upon receipt of a valid order from a participating agency.

INSTRUCTIONS TO BIDDERS AND CONTRACT TERMS AND CONDITIONS, Revised 10/2013, are a part of this Invitation to Bid. Copies may be downloaded by clicking the link above. All prior versions of Instructions to Bidders, Contract Terms and Conditions are null and void.

By submitting this Invitation to Bid, the Contractor certifies that Contractor has truthfully disclosed the location(s) where all services are to be performed; the location(s) where all applicable State contract data is to be maintained or made available; and the principal location of business for the Contractor and all subcontractors. The Contractor further certifies and acknowledges that Contractor will not change the country of the location(s) where services are performed and will not change the country of the location(s) where data is maintained or made available without prior written consent of the State.

INQUIRIES: All inquiries should be submitted a minimum of five (5) working days prior to the bid opening date through the Procurement website, http://procure.ohio.gov/. Locate the "Quick Links" menu on the right, select "Bid Opportunities Search"; Step 1, enter the "Bid Number"; Step 2, click "Search"; Step 3, click the "Document/Bid Number." The "Submit Inquiry" button is at the bottom right of the Opportunity Detail page. Bidders will not receive a personalized e-mail response to their question, nor will they receive notification when the question is answered. Responses may be viewed by clicking the "View Q & A" button located beneath the "Submit Inquiry" button.

	AUTHORIZED SIGNATURE (ORIGINAL SIGNATURE ONLY) (Please sign in blue ink)	DATE

The ORIGINAL signed Bid must be submitted to the Office of Procurement Services by 1:00 o'clock p.m., on the above listed opening date to receive consideration for award. It is requested that the Bidder NOT sign their bid in BLACK ink. BIDDER CERTIFIES, by signature affixed to its bid, that the information provided by it in its bid including the certified statements, is accurate and complete. Bidder declares to have read and understood and agrees to be bound by all of the instructions, terms, conditions and specifications of this Invitation to Bid and agrees to fulfill the requirements of any awarded contract at the prices bid.

CERTIFICATION STATEMENTS

I. **DOMESTIC AND/OR OHIO PREFERENCE**: Bidders claiming preference for Domestic Source End Products and/or the Ohio preference, pursuant to Revised Code Sections 125.09 and 125.11 and Administrative Code Section 123:5-1-06 must complete the following information. **Any bidder who intentionally submits false or misleading information in an attempt to receive a bid preference will be immediately disqualified and may be subject to legal action up to and including debarment.** Bidders who qualify as an "Ohio" bidder (offer an Ohio product or who have significant Ohio economic presence) or who qualify as a Border State bidder are eligible to receive a five percent (5%) preference over non-Ohio/Border state bidders. The state reserves the right to clarify any information during the evaluation process. **BIDDERS MUST COMPLETE THIS CERTIFICATION TO RECEIVE THE PREFERENCE.**

A. DOMESTIC PREFERENCE (BUY AMERICAN): [Not applicable to "Excepted Products"]

1. Where is each product/services being offered mined, raised, grown, produced or manufactured?
   ☐ United States: _____(State) ☐ Canada ☐ Mexico (Go to B-1)
   ☐ Other: (Specify Country)_____ (Go to A-2)

2. End product is manufactured outside the United States and at least 50% of the cost of its components are produced, mined, raised, grown or manufactured within the United States. The cost of components may include transportation costs to the place of manufacture and, in the case of components of foreign origin, duty whether or not a duty free entry certificate is issued.
   ☐ Yes (Go to Section B-1) ☐ No (Go to Section A-3)

3. The Bidder hereby certifies that each end product, except the products listed below, is a domestic source end product as defined in the Buy American Act and that components of unknown origin have been considered to have been mined, produced, grown or manufactured outside the United States.

   _____(Item) _____(Country of Origin)

   _____(Item) _____(Country of Origin)

A domestic end source product is deemed to be excessively priced if it exceeds the cost of the foreign product by more than 6%. Pursuant to FAR, Part 25, the state of Ohio does not acquire supplies or services that cannot be imported lawfully into the United States. The contractor, their subcontractor(s) and any agent of the contractor or subcontractor must not acquire any supplies or services originating from sources within, or that were located in or transported from or through Cuba, Iran, Iraq, Libya, North Korea, Sudan Territory of Afghanistan controlled by the Taliban, or Serbia (excluding the territory of Kosovo).

B. OHIO PREFERENCE (BUY OHIO):

1. The products/services being offered are raised, grown, produced, mined or manufactured in Ohio.
   ☐ Yes (Go to II.) ☐ No (Go to B-2)

2. Bidder has significant economic presence within the state of Ohio.
   ☐ Yes (Answer a, b, c, d below) ☐ No (Go to B-3)
   a) Bidder has paid the required taxes due the state of Ohio ☐ Yes ☐ No
   b) Bidder is registered with the Ohio Secretary of State
      ☐ Yes (Charter/Registration No.: _____) ☐ No
      Questions regarding registration should be directed to (614) 466-3910 or visit their web site at: http://sos.state.oh.us/
   c) Bidder has ten or more employees based in Ohio or border state. ☐Yes ☐ No (Go to B-2d)
   d) Bidder has seventy-five percent or more employees based in Ohio or border state.
      ☐ Yes ☐ No (Go to B-3)

3. Border state bidder:
   ☐ Yes (Specify which state then go to B-2c): ☐ KY ☐ MI ☐ NY ☐ PA ☐ IN ☐ No (Go to B-4)

4. Border state bidder: mined products mined in respective border state ☐ Yes ☐ No ☐ Not Applicable

II. **E.D.G.E. DESIGNATION:** Is the bidder a certified E.D.G.E. business ☐ Yes ☐ No

For information on E.D.G.E. designation, please visit the DAS Equal Opportunity Division website at: http://das.ohio.gov/Divisions/EqualOpportunity/tabid/80/Default.aspx

III. **INDEPENDENT CONTRACTOR ACKNOWLEDGEMENT:** Contractor certifies that Contractor is a "**business** entity" as that term is defined in O.R.C. Section 145.037. See SUPPLEMENTAL CONTRACT TERMS AND CONDITIONS, S-21. Independent Contractor Acknowledgement.

Bidder is defined as a business entity ☐ Yes ☐ No

SPECIAL CONTRACT TERMS AND CONDITIONS

AMENDMENTS TO CONTRACT TERMS AND CONDITIONS: The following Amendments to the Contract Terms and Conditions do hereby become a part hereof. In the event that an amendment conflicts with the Contract Terms and Conditions, the Amendment will prevail.

DELIVERY AND ACCEPTANCE**:** Services will be performed as set forth in the Contract and in accordance with paragraphs S-8, S-9, and S-10 of the SUPPLEMENTAL CONTRACT TERMS AND CONDITIONS. The location of performance will be noted on the purchase order issued by the participating agency/institution. Payment for services rendered will occur upon the inspection and written confirmation by the ordering agency that the services provided conform to the requirements set forth in the Contract. Unless otherwise provided in the Contract, payment shall be conclusive except as regards to latent defects, fraud, or such gross mistakes as amount to fraud.

HIPAA: As a condition of receiving a contract from the State, the Contractor and any subcontractor(s), will be required to comply with 42 U.S.C. Sections 1320d through 1320d-8, and regulations at 45 C.F.R. Section Parts 160, 162, and 164 [relating to privacy and security] regarding disclosure and safeguarding of protected health information under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, as amended by the American Recovery and Reinvestment Act of 2009. Contractor agrees to comply with all requirements of the federal Health Insurance Portability and Accountability Act (HIPAA) applicable to it as a Covered Entity and/or a Business Associate. In the event of a material breach of Contractor's obligations under this section, the State Department of Administrative Services may terminate the Contract according to provisions for Contract termination.

CONTRACT RENEWAL: The Contract may be renewed for one (1) month at the State's option. Additionally, this Contract may be renewed, by agreement, for any number of times for any period of time under the same prices, terms and conditions stated herein. The cumulative total of all renewals by agreement may not exceed four (4) years.

SITE VISIT: Prior to submitting their bid response, the bidder should visit the agency(ies) they are bidding in order to survey the facility(s) and to become familiar with the requirements of the bid. The bidder must contact each facility to schedule an appointment. To schedule an appointment, please refer to Appendix A. Once a contract is awarded, failure of the bidder to have requested a site visit to become familiar with the facility and requirements of the bid will be insufficient reason to support any request to be released from the contract.

EVALUATION: Bids will be evaluated in accordance with Article I-17 of the "Instructions to Bidders". In addition, the state will award based on the low lot total by Region. Low lot total will be determined by adding the cost of each service in a region together to arrive at a total for all items in a region.

CONTRACT AWARD: The contract will be awarded to the lowest responsive and responsible bidder by Region. Failure to bid all items for all institutions in a region may result in the bidder being deemed not responsive.

FIXED-PRICE WITH ECONOMIC ADJUSTMENT: The contract prices(s) will remain firm for the first twelve (12) months duration of the contract. Thereafter, the Contractor may submit a request to increase their price(s) to be effective sixty (60) calendar days after acceptance by DAS. No price adjustment will be permitted prior to the effective date of the increase received by the Contractor from his suppliers, or on purchase orders that are already being processed, or on purchase orders that have been filled and are awaiting shipment. If the Contractor receives orders requiring quarterly delivery, the increase will apply to all deliveries made after the effective date of the price increase.

The price increase must be supported by a general price increase in the cost of the finished supplies, due to increases in the cost of raw materials, labor, freight, Workers' Compensation and/or Unemployment Insurance, etc. Detailed documentation, to include a comparison list of the contract items and proposed price increases, must be submitted to support the requested increase. Supportive documentation should include, but is not limited to: copies of the old and the current price lists or similar documents which indicate the original base cost of the product to the Contractor and the corresponding increase, and/or copies of correspondence sent by the Contractor's supplier on the supplier's letterhead, which contain the above price information and explains the source of the increase in such areas as raw materials, freight, fuel or labor, etc.

Should there be a decrease in the cost of the finished product due to a general decline in the market or some other factor, the Contractor is responsible to notify DAS immediately. The price decrease adjustment will be incorporated into the contract and will be effective on all purchase orders issued after the effective date of the decrease. If the price decrease is a temporary decrease, such should be noted on the invoice. In the event that the temporary decrease is revoked, the contract pricing will be returned to the pricing in effect prior to the temporary decrease. For quarterly deliveries, any decrease will be applied to deliveries made after the effective date of the decrease. Failure to comply with this provision will be considered as a default and will be subject to Provision I.C. "Termination/Suspension" and Provision II. of the "Contract Remedies:" of the "Standard Contract Terms and Conditions".

SPECIAL CONTRACT TERMS AND CONDITIONS, CONT'D.

Should a statewide or national decrease in the cost of fuel occur, that is greater than 20% of the cost of fuel at the time of Contract award or approved increase, the Contractor will advise Procurement Services of said decrease and the Contract will be adjusted accordingly. Said decrease will become effective seven (7) calendar days after notification. Failure of the Contractor to notify Procurement Services of a decrease will be considered as a default and the Contractor will be responsible to reimburse the state for any overpayments. Said increases or decreases will be effective on all orders placed on or after the approval date of the adjustment.

REFERENCES: To be considered responsive the bidder must, at the time of bid submission, be an established business with all required licenses, bonds, facilities, equipment and trained personnel necessary to perform the work in this bid. Each bidder is to submit, with the bid, a listing of three (3) references documenting experience in providing mobile X-Rays, Ultrasound and EKGs, in accordance with state and federal standards and guidelines, within the previous three (3) years. Name, address and telephone number of each reference must be included.

LICENSE: The Contractor must be properly registered by the Ohio Department of Health to possess X-ray equipment in accordance with Ohio Administrative Code 3701:1. The Contractor shall provide copies of current Ohio licenses, with no restrictions or limitations, with the bid submission. If the licenses are not provided with the bid submission the bidder will have seven (7) calendar days in which to provide them once they have been requested by the Office of Procurement Services. Failure to provide them within seven (7) calendar days may deem your bid not responsive.

The Contractor must maintain all licenses throughout the term of this contract and any renewals. At the request of a State Agency, a copy shall be provided within seven (7) calendar days. Failure to maintain and provide copies of license(s) when requested may result in cancellation of the Contract.

CONTRACTOR PERSONNEL: Contractor warrants that all operation of equipment will be by Certified Radiological Technologists, licensed by the State of Ohio. The Contractor must assure that all Radiological Technologists receive an annual performance evaluation. Contractor shall list with bid submittal names of all providers who will be performing services on the contract, and provide copies of current licenses.

Licenses may be verified at the following link: https://odhgateway.odh.ohio.gov/xraylicensure/activelicenses.aspx.

Contractor warrants that all radiology interpretation services shall be performed by an Ohio licensed American Board of Radiology Certified Physician. Contractor shall list, with bid submittal, names of all providers who will be performing services on the contract, and provide copies of current licenses and certifications.

If the licenses, for the technologists and the physicians, are not provided with the bid submission the bidder will have seven (7) calendar days in which to provide them once they have been requested by the Office of Procurement Services. Failure to provide them within seven (7) calendar days may deem your bid not responsive. Licenses must be maintained throughout the term of this contract and any renewals. Failure to maintain registration/license(s) may result in cancellation of the Contract. The State reserves the right to ask the awarded Contractor to send proof of requirements at any time during the life of this Contract. Failure to provide them within seven (7) calendar days may result in cancellation of the Contract.

CREDENTIALING AND PRIVILEGING (DMH ONLY): The awarded contractor will be required to submit documents necessary for DMH to credential and privilege providers. Subsequent to contract award the Agency will provide the documents for completion. All radiologists must be credentialed and privileged for each of the DMH facilities for which they will be interpreting test results. Failure to provide these documents, properly completed as instructed, may result in cancellation of the Contract. Until the provider has been credentialed by the Agency, they will be unable to provide services.

BID AUTOMOBILE LIABILITY CHECKLIST:

Contractor will indicate, by checking the appropriate box(es) below, which mode of transportation will apply to this contract.

☐ Bidder/Broker ("The Contractor") or their Sub Contractor will make delivery or be performing services using a vehicle that is owned, leased or rented. Provide Certificate of Insurance documenting automobile liability with a Combined Single Limit of $500,000.00.

☐ Goods/Services will be delivered via common carrier.

☐ No employee or representative of the contractor will have cause to be on state property to make deliveries or to perform services.

DISCLOSURE OF SERVICE PROVIDERS (See Standard Contract Terms and Conditions, Section [Roman Numeral] V. General Provisions:, Paragraph G.):

Bidders seeking to enter into a service contract shall disclose the following:

a) Principal location of business for the contractor (Name/City/State/Country)

_____

b) Principal location of all subcontractors (Name/City/State/Country)

_____

_____

_____

c) Location where services will be performed (Name/City/State/Country)

_____

_____

_____

d) Location where any State data, applicable to the Contract, will be maintained or made available (Name/City/State/Country)

_____

_____

_____

By the signature affixed to Page 1 of this Bid, Bidder hereby certifies that the above information is true and accurate. The Bidder agrees that no changes will be made to this list of subcontractors or locations where work will be performed or data will be stored without prior written approval of DAS. Any attempt by the Bidder/Contractor to change or otherwise alter subcontractors, locations where services will be performed or locations where data will be stored, without prior written approval of DAS, will be deemed as a default. If a default should occur, DAS will seek all legal remedies as set forth in the Terms and Conditions which may include immediate cancellation of the Contract. Failure to complete this page may deem your bid not responsive.

SPECIFICATIONS FOR ON-SITE MOBILE RADIOGRAPHY SERVICES

I. SCOPE

The purpose of this bid is to obtain a Contractor(s) to provide professional services for the performance of radiological (X-Ray) examinations, Ultrasounds and diagnostic reading of Electrocardiograms (EKG) as needed to provide quality, rapid, urgent medical evaluation of adult patients of the Department of Rehabilitation and Correction (DRC) and the Department of Mental Health (DMH), and juveniles at the Department of Youth Services (DYS). The services will be provided at institutions located throughout the State and will be performed while maintaining a safe and secure environment. The patients served by this contract will include minors in a correctional facility, patients with a mental illness, and adult patients who are inmates.

II. DEFINITIONS

A. Definitions. Terms used, but not otherwise defined, in this document shall have the same meaning as those terms in 45 Code of Federal Regulations ("CFR") §§ 160.103, 164.402, and 164.501.

1. HIPAA. The use of the term "HIPAA" shall mean the Health Insurance Portability Act of 1996, and all of the implementing regulations of that statute, including Part 160 and 164 of Title 45 of the CFR.
2. Individual. The use of the term "Individual" in this Exhibit A shall have the same meaning as the term "individual" in 45 CFR § 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).
3. Privacy Rule. The Standards for Privacy of Individually Identifiable Health Information at 45 CFR part 160 and part 164, subparts A and E.
4. Security Rule. The Standards for Security of Individually Identifiable Health Information at 45 CFR parts 160 and 162 and part 164, subparts A and C.
5. Information. The use of the term "Information" in this Exhibit A shall have the same meaning as the term "protected health information" in 45 CFR § 160.103, limited to the information created or received by Contractor from or on behalf of the State.
6. Required By Law. The use of the term "required by law" in this Exhibit A shall have the same meaning as the term "required by law" in 45 CFR § 164.103.
7. Breach. The use of the term "Breach" in this Exhibit A shall have the same meaning as the term "breach" in 45 CFR § 164.402.
8. Unsecured Information. The use of the term "Unsecured Information" in this Exhibit A shall have the same meaning as the term "unsecured protected health information" in 45 CFR § 164.402.
9. HHS - The U.S. Department of Health and Human Services or its designee.
10. Disclose. The release, transfer or provision of access to Information, whether oral or recorded in any form or medium.
11. Use - The sharing, employment, application, utilization, examination, or analysis, in any form or medium, of Information within the Contractor's organization.

III. CLASSIFICATION

1. MOBILE X-RAY

A. Certified Radiological Technologist(s) licensed by the state of Ohio shall administer required X-Rays and an Ohio Licensed and Board Certified Radiologist Physician shall provide radiology interpretations, consultations and written reports. X-Rays may include, but are not limited to, the following:

Acute Abdomen Series	Hand	Pelvis
Abdomen Single AP	Hip	Ribs
Abdomen W/PA Chest	Humerus	Sacra-ileac Joints
Acromio-Clay Joint	Internal Auditory Canals	Sacrum-Coccyx
Ankle	Knee	Scapula
Bone Survey	Lumbar Spine	Shoulder
Cervical Spine	Lumbar Spine – Oblique	Sinuses

SPECIFICATIONS FOR ON-SITE MOBILE RADIOGRAPHY SERVICES, CONT'D.

Chest AP & Lat	Mandible	Skull
Clavicle	Mastoids	Sternum
Elbow	Nasal Bones	Temp Mandibular Joints
Facial Bones	Navicular – Wrist	Thoracic Spine
Femur	Orbits	Thumb, finger, toes
Foot	OS Callous – Heel	Tibia & Fibula
Forearm	Patella	Wrist

B. Chest X-Rays for positive PPD TB Skin Test shall include Anterior-Posterior (AP) and Lateral Views.

C. The Contractor will provide comparison interpretations when a previous test has been conducted. A copy of a previous exam, required for comparison interpretation when a previous X-Ray has been conducted, shall be provided by the Contractor no longer than three (3) business days following request. Comparison may be to X-Rays taken by contractor, by the Institution, by OSU or another outside entity.

D. The Contractor will provide digital radiography (DR) and furnish medical diagnostic interpretations, consultation as needed, and written reports detailing X-Ray findings to the healthcare staff at each facility. DR X-Rays shall be conducted in a medically appropriate manner and in accordance with applicable sections of the Ohio Revised Code and Ohio Administrative Code.

E. Panorex, and dental X-Rays will not be required.

2. MOBILE ULTRASOUND SERVICES

Certified Ultrasound Technologist(s) shall administer required Ultrasound and an Ohio Licensed and Board Certified Radiologist Physician shall provide interpretations, consultations and written reports. Ultrasounds may include, but are not limited to, the following:

Abdominal
Breast
Echocardiogram
Pelvic
Obstetrical
Prostate
Renal
Thyroid
Transvaginal

The Contractor shall furnish individual videos of each test given, and the Contractor will furnish black & white and /or color printouts, as requested. The video format shall be Dicom compatible, or another video format or system approved by DAS.

3. MOBILE EKG SERVICES

Administer electrocardiogram (EKG) procedure and provide the interpretation results and written reports to the requesting Agency. The Contractor will provide EKG technician as scheduled by the using institution. Subsequent to performing the services the test results will be forwarded to the agency appointee.

4. MAMMOGRAM SERVICES

A. Mammogram services will only be required to be performed at the Department of Rehabilitation and Correction, Ohio Reformatory for Women utilizing the DRC's mammography equipment.
B. Board Certified Radiologist Physician(s) shall provide radiology interpretations, consultations and written reports.

IV. CONTRACTOR REQUIREMENTS

A. Contractor shall be on call and available to provide services during normal business hours of 7:00 AM to 5:00 PM, EST, Monday through Friday, and at such other times as scheduled by the facility.

B. Contractor shall arrive at the site either at a pre-scheduled time or within three (3) hours of request by the facilities' health care staff. Each facility using the services will be provided with appropriate order forms by the Contractor. Doctor's orders will be called or faxed to the Contractor and the Contractor will dispatch the appropriate technologist based on need and priority of service. Once exams are completed the x-ray images will be forwarded to the Radiologist for reading. For routine examinations a type-written interpretation will be provided to the institution no later than two (2) business days following the exam.

For non-routine/emergency exams verbal results are called to the designated location at each facility within two (2) hours. Legible and thorough interpretive reports shall be provided to facility's health care staff immediately or as soon as observed but no later than twenty four hours after testing. Contractor agrees to notify the institution immediately if X-ray images reveal any abnormalities that could cause loss of life, limb, or decrease of function if not identified and treated immediately.

Each facility will notify the Contractor of healthcare staff to be involved in this process at each location, once the bid is awarded.

C. For all images and interpretations provided for DRC institutions the Contractor will work with the Department of Rehabilitation and Corrections to interface with their PACS system and transmit bidirectional interface of images and reports.

DYS and DMH may request a CD and narrative report, if desired. CD should be mailed within 72 hours of the request by the institution.

D. Telephone consultation between the Contractor's radiologist and the facility's health care staff shall be available as needed, at no additional cost to the facility. Contractor shall provide all institutions with contact information.

E. Contractor shall insure that all images are readable prior to leaving the facility. If additional images are required by the radiologist to complete the reading, they should be performed, at that time, at no additional charge to the institution.

F. Contractor equipment is to be maintained per current standards of practice regarding safety, i.e. x-raying of lead aprons, maintenance, cleaning and disinfecting. Documentation is to be made available per agencies request providing evidence of maintaining safety standards on all equipment.

G. The Contractor will properly invoice each facility monthly, as listed in Appendix A, for the services provided to that facility. The Contractor is to include a log with the billing reports indicating the date, client name, facility, numerical classification and type of service(s) rendered. This log must be signed and dated by a designee of the facility's Health Care Staff verifying the service(s) for payment.

H. DRC Specific Requirements

1. Contractor's technicians will be required to submit to and pass a background check by DRC prior to entering any institution.
2. FMC radiology is a fully digital operation, however, some comparison films still exist in film format. The Contractor will be required to read both digital x-rays as well as Analog films and incorporate readings and comparisons into a single digital format report.

SPECIFICATIONS FOR ON-SITE MOBILE RADIOGRAPHY SERVICES, CONT'D.

I. DMH Specific Requirements

1. The Joint Commission (TJC) compliance may not be a requirement at all facilities. If required, the awarded contractor will submit necessary documentation of compliance and competence as required by TJC standards; Medicare (CMS) standards; and other regulatory agencies and professional bodies. The Contractor will cooperate in conducting performance improvement studies and quality assurance mechanisms. The Contractor agrees to provide verification of any credentialing and/or privileging information, required by the Department of Mental Health, necessary to privilege credential and privilege physicians. Facilities not currently using TJC requirements may add it during the contract term.

2. DMH requires that practitioners providing radiological interpretations for DMH hospitals be identified. The DMH hospitals must credential and privilege each practitioner every 2 years for the duration of this contract and any subsequent renewals. The hospitals will not accept interpretations performed by a non-privileged practitioner. Failure to maintain this accreditation for the practitioners will result in contractor being found in default of Contract.

3. Only those employees privileged by the facility will be paid for interpretations.

V. QUALIFICATIONS

A. Contractor warrants that all operation of equipment shall be performed by Certified Radiological Technologist, licensed by the State of Ohio.

B. Due to the nature of security and working conditions in mental healthcare and prison environments there may be potential of unexpected delays. The State will not pay any additional charges for travel time for the mobile unit and/or technicians or other employees, or for any other related down time incurred by the Contractor due to delays that may be encountered either entering or leaving a facility.

VI. ADDITIONAL NOTES

A. Each facility shall arrange security clearance for the successful Contractor and its employees. Background checks may be required.

B. The awarded Contractor shall remove all waste generated by this service.

C. State Agencies reserve the right to modify or delete its facility locations with thirty (30) day notice, without additional cost or expense to the agency by the Contractor.

PRICE SCHEDULE

NORTHWEST REGION	COST PER X-RAY WITH INTERPRETATION (UP TO 5 VIEWS PER X-RAY)	COST PER EKG WITH INTERPRETATION	COST PER ULTRASOUND WITH INTERPRETATION
DMHAS INSTITUTIONS			
Northwest Ohio Psychiatric Hospital (NOPH)			
DRC INSTITUTIONS			
Toledo Correctional Institution (ToCI)			
Allen Oakwood Correctional Institution (AOCI)			
Mansfield Correctional Institution (ManCI)			
Richland Correctional Institution (RiCI)			
Marion Correctional Institution (MCI)			
Ohio Reformatory for Women (ORW)			

	COST PER MAMMOGRAM WITH INTERPRETATION (Equipment provided by Institution)
Ohio Reformatory for Women (ORW)	

PRICE SCHEDULE, CONT'D.

NORTHEAST REGION	COST PER X-RAY WITH INTERPRETATION (UP TO 5 VIEWS PER X-RAY)	COST PER EKG WITH INTERPRETATION	COST PER ULTRASOUND WITH INTERPRETATION
DRC INSTITUTIONS			
Grafton Correctional Institution (GCI)			
Lorain Correctional Institution (LorCI)			
Ohio State Penitentiary (OSP)			
Trumbull Correctional Institution (TCI)			
Northeast Pre-Release Center (NPRC)			
DMHAS INSTITUTIONS			
Heartland Behavioral Healthcare (HBH)			
Northcoast Behavioral Healthcare (NBH-N)			
DYS INSTITUTIONS			
Indian River Juvenile Corr. Facility (IRJCF)			

PRICE SCHEDULE, CONT'D.

SOUTHWEST REGION	COST PER X-RAY WITH INTERPRETATION (UP TO 5 VIEWS PER X-RAY)	COST PER EKG WITH INTERPRETATION	COST PER ULTRASOUND WITH INTERPRETATION
DRC INSTITUTIONS			
Dayton Correctional Institution (DCI)			
Lebanon Correctional Institution (LeCI)			
Warren Correctional Institution (WCI)			
Ross Correctional Institution (RCI)			
Chillicothe Correctional Institution (CCI)			
London Correctional Institution (LoCI)			
Madison Correctional Institution (MaCI)			
DMHAS INSTITUTIONS			
Summit Behavioral Healthcare (SBH)			

PRICE SCHEDULE, CONT'D.

SOUTHEAST REGION	COST PER X-RAY WITH INTERPRETATION (UP TO 5 VIEWS PER X-RAY)	COST PER EKG WITH INTERPRETATION	COST PER ULTRASOUND WITH INTERPRETATION
DRC INSTITUTIONS			
Belmont Correctional Institution (BeCI)			
Noble Correctional Institution (NCI)			
Pickaway Correctional Institution (PCI)			
Southeastern Correctional Institution (SCC-SCI)			
Hocking Correctional Facility (SCC-HCF)			
Franklin Medical Center (FMC)			
Southern Ohio Correctional Facility (SOCF)			
Corrections Reception Center (CRC)			
DMHAS INSTITUTIONS			
Twin Valley Behavioral Healthcare (TVBH)			
DYS INSTITUTIONS			
Circleville Juvenile Correctional Facility (CJCF)			

As a baseline for any future cost increase requests, the Bidder shall indicate, as a percentage of the total cost, what the cost elements are for calculating their price to the State. Sum of percentages must equal one hundred percent.

Administrative Cost	Labor Cost	Fuel Cost	Maintenance Cost	Other (Name Cost) (if applicable)
%	%	%	%	%

APPENDIX A

Institution	Contact	Contact Phone	Contact e-mail
Circleville Juvenile Correctional Facility (CJCF) 640 Island Rd. Circleville, OH 43113	Alvin Braddy	(740) 477-2500 ext.7180	Alvin.Braddy@dys.ohio.gov
Cuyahoga Hills Juvenile Corr. Facility (CHJCH) 4321 Green Rd. Highland, Hills, OH 44128	Dale LeChance	(216) 682-2223	Dale.LaChance@dys.ohio.gov
Indian River Juvenile Correctional Facility (IRJCF) 2775 Indian River Road SW Massillon, OH 44647	George Poullas	(330) 834-2712	George.Poullas@dys.ohio.gov
Heartland Behavioral Healthcare (HBH) 3000 Erie Street South Massillon, OH 44647	Lori McCambridge	(330) 833-3135	lori.mccambridge@mha.ohio.gov
Northcoast Behavioral Healthcare (NBH-N) Northfield Campus 1756 Sagamore Rd. Northfield, OH 44067	John Zmina	(330) 467-7131	john.zmina@mha.ohio.gov
Northwest Ohio Psychiatric Hospital (NOPH) 930 South Detroit Ave. Toledo, OH 43614	Karon Price	(419) 481-1881	karon.price@mha.ohio.gov
Summit Behavioral Healthcare (SBH) 1101 Summit Rd. Cincinnati, OH 45237	Steven Burns	(513) 948-3600	steven.burns@mha.ohio.gov
Twin Valley Behavioral Healthcare (TVBH) 2200 West Broad St. Columbus, OH 43223	Tracy Gladen	(614) 752-0333	tracy.gladen@mha.ohio.gov

APPENDIX A, CONT'D.

Institution	Contact	Contact Phone	Contact e-mail
Allen/Oakwood Correctional Facility (AOCI) 2338 North West St. Lima, OH 45801	Tom Ferry	419 224-8000 x 2152	tom.ferry@odrc.state.oh.us
Belmont Correctional Institution (BeCI) 68518 Bannock Road, S.R. 331 St. Clairsville, OH 43950	Roger Moore	740-695-5169 x 2155	Roger.Moore@odrc.state.oh.us
Chillicothe Correctional Institution (CCI) 15802 State Route 104 North Chillicothe, OH 45601	Jane McAfee	740-774-7080 x 2277	Jane.McAfee@odrc.state.oh.us
Correctional Reception Center (CRC) 11271 State Route 762 Orient, OH 43146	Karen Duffel	614-877-2441 x 7000	karen.duffel@odrc.state.oh.us
Dayton Correctional Institution (DCI) 4104 Germantown Street Dayton, OH 45417	Randy Strong	937-263-0060 x 2156	Randy.strong@odrc.state.oh.us
Franklin Medical Center (FMC) 1990 Harmon Ave. Columbus, OH 43223	Steven Sroufe	614-445-5960 x 2101	Steven.sroufe@odrc.state.oh.us
Grafton Correctional Institution (GCI) 2500 South Avon Beldon Road Grafton, OH 44044	Patti Capelety	440-748-1161 x 5410	Patti.capelety@odrc.state.oh.us
Hocking Correctional Facility (HCF) 16759 Snake Hollow Road Nelsonville, OH 45764	Charles Ressley	740-753-1917 x 2350	Charles.ressley@odrc.state.oh.us
Lebanon Correctional Institution (LeCI) State Route 63 Lebanon, OH 45036	Laura Orahoske	513-932-1211 x 2006	Laura.orahoske@odrc.state.oh.us
London Correctional Institution (LoCI) 1580 State Route 56 London, OH 43140	Jeff Sranforth	740-852-2454 x 1102	Jeffery.sranforth@odrc.state.oh.us
Lorain Correctional Institution (LorCI) 2075 south Avon Beldon Road Grafton, OH 44044	Tobey Carpenter	440-748-1049 x 203	Tobey.carpenter@odrc.state.oh.us
Madison Correctional Institution (MaCI) 1851 State Route 56 London, OH 43140	Tonya Briggs	740-852-9777 x 2103	Tonya.briggs@odrc.state.oh.us
Mansfield Correctional Institution (ManCI) 1150 North Main Street Mansfield, OH 44901	Tom Bond	419-525-4455	Thomas.bond@odrc.state.oh.us
Marion Correctional Institution (MCI) 940 Marion-Williamsport Road Marion, OH 43302	Rebecca Shafer	740-382-5781 x 2400	Rebecca.shafer@odrc.state.oh.us

APPENDIX A, CONT'D.

Institution	Contact	Contact Phone	Contact e-mail
Noble Correctional Institution (NCI) 15708 McConnelsville Road Caldwell, OH 43724	Darin Clark	740-732-5188 x 2012	Darin.clark@odrc.state.oh.us
Ohio Reformatory for Women (ORW) 1479 Collins Ave. Marysville, OH 43040	Boniface Ogbonna	937-642-1065 x 2221	Boniface.ogbonna@odrc.state.oh.us
Ohio State Penitentiary (OSP) 878 Coitsville-Hubbard Road Youngstown, OH 44505	Carolyn Nowak	330-743-0700 x 2130	Carolyn.nowak@odrc.state.oh.us
Pickaway Correctional Institution (PCI) 11781 State Route 762 Orient, Oh 43146	Margaret (Peg) Brown	614-877-4362 x 2560	Margaret.brown@odrc.state.oh.us
Richland Correctional Institution (RiCI) 1001 Olivesburg Road Mansfield, OH 44901	Catherine Mosier	419-526-2100 x 2032	Catherine.mosier@odrc.state.oh.us
Ross Correctional Institution (RCI) 16149 State Route 104 Chillicothe, OH 45601	Dwight Presler	740-774-7050 x 2351	Dwight.presler@odrc.state.oh.us
Southeastern Correctional Institution (SCI/SCC) 5900 B.I.S. Road Lancaster, OH 43130	Charles Ressley	740-653-4324 x 2035	Charles.ressley@odrc.state.oh.us
Southern Ohio Correctional Facility (SOCF) Lucasville-Minford Road Lucasville, OH 45699	Nancy Behn	740-259-5544 x 3280	Nancy.behn@odrc.state.oh.us
Toledo Correctional Institution (ToCI) 2001 East Central Ave Toledo, OH 43608	Felicitas Jackson	419-726-7977 x 7188	Felicitas.jackson@odrc.state.oh.us
Trumbull Correctional Institution (TCI) 5701 Burnett Road Leavittsburg, OH 44430	Jacqueline Scott	330-898-0820 x 2023	Jacqueline.scott@odrc.state.oh.us
Warren Correctional Institution (WCI) State Route 63 Lebanon, OH 45036	Dawn Brown	513-932-3388 x 2153	Dawn.brown@odrc.state.oh.us