


<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>			1. Contract Number DCJM-2015-Q-0003	Page of Pages 1   1	
2. Amendment/Modification Number A00001	3. Effective Date See 16C	4. Requisition No.		5. Solicitation Caption Medical Professional Services	
6. Issued by: Department on Disability Services Office of Contracts and Procurement 1125 15 <sup>th</sup> Street, NW., 2 <sup>nd</sup> Floor Washington, DC 20005		Code JMOMB	7. Administered by (If other than line 6)		
8. Name and Address of Contractor (No. street, city, county, state and zip code)  <b>To Be Determined</b>  Phone:                      Fax:                      Email:		X	9A. Amendment of Solicitation No. DCJM-2015-Q-0003		
			9B. Dated (See Item 11)		
		10A. Modification of Contract/Order No.			
		10B. Dated (See Item 13)			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended. <input type="checkbox"/> is not extended. Offerors must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning <u>one</u> copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) BY separate letter or fax which includes a reference to the solicitation and amendment number. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such may be made by letter or fax, provided each letter or telegram makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.					
12. Accounting and Appropriation Data (If Required)					
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14					
A. This change order is issued pursuant to (Specify Authority): THE CHANGES CLAUSE, The changes set forth in Item 14 are made in the contract/order no. in item 10A.					
B. The above numbered contract/order is modified to reflect the administrative changes (such as changes in paying office, appropriation data etc.) set forth in item 14, pursuant to the authority of 27 DCMR, Chapter 36, Section 3601.2.					
C. This supplemental agreement is entered into pursuant to authority of:					
D. Other (Specify type of modification and authority) 27 DCMR Section 2008, Exercise of Option					
<b>E. IMPORTANT:</b> Contractor <input type="checkbox"/> is not <input checked="" type="checkbox"/> is required to sign this document and return <u>1</u> copy to the issuing office.					
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.) Request for Quote (RFQ) No. DCJM-2015-Q-0003 for Medical Professional Services is hereby amended as follows:					
I. Revise Section 2.1 (Scope) of the Statement of Work to include:					
<ul style="list-style-type: none"> <li>• 2.1.11 Laboratory Service (Medical)</li> <li>• 2.1.12 Drug and Alcohol Testing Service</li> </ul>					
II. Revise Section 2.4 (Referral Process):					
A Vocational Rehabilitation (VR) Specialist will refer Consumers to the Provider with a completed copy of authorization and the type of service(s) required. This shall include all medical lab work, x-ray services and illicit drug tests that are ordered by a physician, licensed provider, RSA staff or a consultant to address health or drug abuse issues for RSA consumers. The Provider shall complete each evaluation within ten (10) business days after the receipt of the referral packet and forward the completed initial assessment report and any recommendations for diagnosis, prognosis and treatment to the VR Specialist as soon as possible but not later than twenty (20) business days. The VR Specialist will determine if the Consumer needs services for diagnosis, prognosis or treatment based on the initial medical assessment and recommendation report before rendering a new authorization.					
Except as provided herein, all terms and conditions of the document is referenced in Item 9A or 10A remain unchanged and in full force and effect.					
15A. Name and Title of Signer (Type or print)			16A. Name of Contracting Officer		
			Marsha Robinson		
15B. Name of Contractor		15C. Date Signed	16B. District of Columbia		16C. Date Signed
					12-17-2014
(Signature of person authorized to sign)			(Signature of Contracting Officer)		