



MID-AMERICA REGIONAL COUNCIL/KANSAS CITY REGIONAL PURCHASING COOPERATIVE

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www.marc.org

ADDENDUM: 2

BID NO./TITLE: Bid No. 117 - STAFFING SERVICES FOR RN/LPN TEMPORARY SERVICES

ISSUE DATE: May 28, 2025

BIDS DUE: June 6, 2025 1:00 p.m. (No change)

Addendum 2 addresses clarification requests received by the deadline of 3:00 p.m. May 22, 2025.

No further clarification inquiries will be accepted.

Clarification requests received and responses shown in red font:

Is this a newly initiated project, or is it a continuation of an existing one?

MARC/KCPRC purchasing policy requires issuing new bids as the current contract expires June 30, 2025 and there are no additional renewal options remaining.

Is this a new or existing contract? If existing do current vendors get preference?

See paragraph 3.1.1 AWARD. There is no predetermination of awards

What is the estimated total contract value or range for the initial two-year term, and potentially for the full five-year term if all renewals are exercised? Appendix A - Are the annual estimated hours provided based on historical usage across all Participants, or are these projections for potential future needs?

The total sales/spend for 2024 is \$219,934 for Wyandotte County. No usage by Johnson County in 2024. No projections available for subsequent terms of the contract. Estimated annual quantity of usage is based on 2024 usage.

If there is an incumbent, provide the incumbent name and pricing and are the incumbents eligible to submit the proposal again?

The current provider is Favorite Healthcare Staffing and is eligible to submit a bid.

DESCRIPTION	Hour Rate:	Minimum # Hours
RN/Paramedic	\$ 60.27	4
RN Charge	\$ 70.85	4
LPN/EMT	\$ 50.75	4
CNA	\$ 35.98	4
CNA/ADMIN	\$ 35.98	4
MA	\$ 37.03	4

Are there any pain points or issues with the current vendor(s)?

No.

How many active contractors are working on this contract currently?

See above.

Provide the names of the Incumbent vendors for this contract?

See above.

What are any challenges or pain points with the present contract vendors?

None.

What is the total spend per incumbent for the duration of the previous contract?

See above.

If ongoing, provide the names of the current service providers/incumbent vendors?

See above.

Provide pricing details of the incumbent vendors See above.

Are there current incumbents for these roles?

See above.

Award of contract:

Number of awards you intend to give (approximate number)?

There is no predetermination of award. See 3.1.3 Award Process.

How many vendors do you intend to award?

There is no predetermination of award. See 3.1.3 Award Process.

What is the expected number of awards ?

There is no predetermination of award. See 3.1.3 Award Process.

Will contract be a single award, or is there a possibility of multiple awards?

There is no predetermination of award. See 3.1.3 Award Process.

Will award of a contract be made to multiple vendors? How will the selection be structured (e.g., tiered by region or by score)?

There is no predetermination of award. See 3.1.3 Award Process.

Will this contract be awarded to a single vendor, or will it be a multi-award contract?

There is no predetermination of award. See 3.1.3 Award Process.

How will the job requests be shared among multiple awarded contractors?

Requests for service will be based upon need of the local health departments.

Should the unit pricing we submit include the 1.5% administrative fee, as well as mileage and travel time?

See paragraph 3.7 COMPOSITE REPORT AND PAYMENTS

Clarify what is meant by including the 1.5 percent Administrative Fee in the unit bid pricing? Are you asking that we add this fee to our proposed rates?

See paragraph 3.7 COMPOSITE REPORT AND PAYMENTS

What specific data elements are required in these sales reports (e.g., Participant name, service type, hours, gross revenue) for the quarterly sales activity reports and administrative fee payments?

See paragraph 3.7 COMPOSITE REPORT AND PAYMENTS

Is there a preferred format or system for submitting these quarterly sales activity reports?

See paragraph 3.7 COMPOSITE REPORT AND PAYMENTS

What is the average length of the assignment?

Length of assignment will depend on the requested needs of the local health departments.

As an out-of-state vendor, will submitting the out-of-state registration certification at the time of submission be sufficient or provide after award? The Excel pricing form asks bidders to list "State business entity ID for conducting business in states of Kansas and Missouri".

It is not necessary to include actual registrations with submittal. If a bidder is not currently registered, state "n/a", however, the successful bidder must be registered to conduct business in Kansas and Missouri prior to any award.

If the resources we provide at the time of proposal submission are not available at the time of a potential contract award, could vendors replace them with equally qualified resources?

See paragraph 2.9 Availability.

Are there any mandated Paid Time Off, Vacation, etc.?

No. These are temporary services needed upon request.

Are the roles you are looking to fill able to work remotely, Hybrid or on site?

See Scope.

Is automobile insurance required for driving between locations on specific dates? If so, please provide details regarding the coverage requirements and any associated documentation needed.

See paragraph 2.27 INDEMNIFICATION AND INSURANCE

Provide the complete list of required insurance coverage types and the minimum liability amounts for each?

See paragraph 2.27 INDEMNIFICATION AND INSURANCE

Are bidders required to submit proof of insurance along with the proposal, or will it be sufficient to provide proof upon award?

See paragraph 3.1.4 NOTICE OF AWARD

Do we need to submit the Certificate of Insurance and Business License with the proposal?

See paragraph 3.1.4 NOTICE OF AWARD

Tentative start date of this engagement?

See cover page of the bid document.

Confirm whether this is intended to be a cooperative contract? Will KCPRC be awarding this contract as a cooperative agreement that can be used by other agencies as well?

See Appendix B Cooperative Purchasing.

Will the contract be awarded based solely on pricing, or will other evaluation criteria be considered as well?

See paragraph 3.1.2 EVALUATION OF BIDS

Evaluation criteria for evaluating the bids for this ITB.

See paragraph 3.1.2 EVALUATION OF BIDS

Will you award the contract to the lowest responsive bidder?

See paragraph 3.1.2 EVALUATION OF BIDS

Are there other specific weighted criteria or factors that will be used to evaluate bids and determine the successful vendor beyond prompt payment discounts and the ability to meet requirements?

See paragraph 3.1.2 EVALUATION OF BIDS

Provide exact proposal format.

See Section 5.0 PRICING and SUBMITTAL SECTION -

Clarify the cost proposal format.

Bidders shall quote the hourly rate for each classification listed, and if there are minimum hours required (i.e. 4 hour shifts).

Provide list of all attachments and forms necessary to include with the proposal.

See Section 5.0 and Table of Contents

Clarify the list of forms to be submitted and exact format for bidders to be considered compliant.

See Section 5.0 and Table of Contents.

Confirmation of bid receipt - what is the appropriate method for contacting the Program Coordinator?

This is clearly shown on the cover page of the bid document.

FTEs required with respect to job titles required under the current contract.

FTEs required with respect to job titles under this contract.

FTEs anticipated on an as-needed basis under this requirement?

The bid does not include any Full Time Employees.

Receipt of addendum to an invitation by a bidder must be acknowledged by signing and returning the addendum. Such acknowledgment must be received prior to the hour and date specified for receipt of bids or returned with the bid and received prior to closing time and date.

Bidder's (Company) Name

Date

By:

Signature of Authorized Agent