

**DIVISION OF VOCATIONAL REHABILITATION  
DISABILITY DETERMINATION SERVICES (DDS)  
REQUEST FOR PROPOSALS - FY 2011 & FY2012**

**PROFESSIONAL SERVICES - DDS CONSULTATIVE SERVICES**

*(Under the Laws of the State of Delaware, Title 29, Chapter 69, Subchapter VI of the Delaware Code)*

**PLEASE TAKE NOTICE** that the Division of Vocational Rehabilitation (DVR), Disability Determination Service (DDS) is seeking proposals to provide professional psychiatric and psychological consultative services to assist DDS staff to adjudicate claims of disability and for vocational services. Successful offerors will be awarded contracts to provide consulting services to the Disability Determination Services for FY 2011 and FY 2012. The consulting services for which proposals sought are:

- **Psychological/Psychiatric Consultant**

**Description of Psychological/Psychiatric Consultant Services:**

1. The Psychiatric Consultant Contractor must be licensed in good standing with the State Board of Medical Practice and must supply proper evidence of this fact
2. The Psychological Consultant (PC) Contractor must be a qualified psychologist and must be licensed in good standing with the State Board of Psychology Examiners and must supply proper evidence of this fact. The PC Contractor can only evaluate mental impairments.
3. The Contractor will provide services at the Disability Determinations Service (DDS) office.
4. The Psychological/Psychiatric Consultant Contractor will evaluate medical evidence on mental impairments and lay evidence provided electronically or by hard copy to determine its adequacy for making disability decisions and contact appropriate resources to obtain necessary information.
5. The Contractor will assess the severity of mental impairments and the impact of process unification Social Security Rulings regarding claimant credibility, symptoms, and medical source opinion on the functional capacities or limitations imposed by the totality of the case evidence
6. The Contractor will review requests for consultative examinations (CE) provided electronically or by hard copy in specific claims to assure the CE's are necessary and that the requested examination (s) will resolve the case issues as intended.
7. The Contractor will review CE reports provided electronically or by hard copy for appropriateness, completeness, and quality and record the findings of this review on a CE checklist form which is given to the Medical Relations Officer (MRO)
8. The Contractor will describe alternatives when concurrence is not given on any case issue or question.
9. The Contractor will evaluate medical questions on mental impairment claims and make recommendations for improvement on letters, forms and in other forms of communication provided electronically or had copy designed to obtain proper evidence.
10. The Contractor will e-mail the Adjudicator and the Adjudicator's Supervisor, the QA Supervisor if he/she can not complete the case on the day it was accepted from the queue.
11. The Contractor will e-mail the Adjudicator, the Adjudicator's Supervisor, the QA Supervisor and the Case Control Administrator if a case cannot be signed, certified, and completed.
12. The Contractor personally discuss cases with DDS adjudicators, supervisors, administrative staff, and other Medical/Psychiatric/Psychological Consultant staff to resolve ways of gathering medical evidence or to determine the sufficiency of case documentation and the final decision to allow or deny benefits.
13. The Contractor will provide training for DDS staff in areas of medical expertise and other adjudicative areas as needed.
14. The Contractor will review determinations and quality reviews of determinations to assure the integrity of the decision based on the medical/lay evidence.

15. The Contractor will complete and sign forms and determinations regarding the medical aspects of case determinations electronically or in writing.
16. As required, Contractor will attend meetings or training sessions conducted by the Social Security Administration, the Division of Vocational Rehabilitation, or the Disability Determination Services.
17. The Contractor will disqualify him/herself from acting on any official matter which involves a relative, personal acquaintance, patient, or her/himself. The Contractor will not work for/under contract with the Social Security Administration.
18. The Contractor will function as an independent contractor and not an officer, agent, or employee of the State of Delaware. As a contractor, no sovereign immunity or indemnification by the State of Delaware or the Agency will accrue. Contractor is not entitled to any rights and privileges of State employment.
19. The Contractor agrees to a fee of \$75.00 per hour for services provided to the DDS.
20. Contractor agrees to be placed on a certified list of potential psychological/psychiatric consultants, and will provide services when and as requested by DDS.
21. The number of hours provided to Contractor will be based upon Contractor's availability and DDS need.
22. The contractor must be computer literate and be able to adapt to the electronic casework environment.

**Instructions for proposal submission/evaluation process:** Instructions for proposal submission are more particularly described in Appendix A of this notice and can also be obtained from [www.bids.delaware.gov](http://www.bids.delaware.gov). Failure to comply with instructions will result in the proposal being rejected, without further review, as not conforming to the RFP requirements.

**Multiple Source Contracts:** It is the intention of the Disability Determination Service to award a contract to more than one offeror.

**Deadline for submitting Proposals:** Four (4) copies of each **sealed** proposal shall be delivered by **December 9th, 2011 at 4:30 p.m.** at the Central Office of the Division of Vocational Rehabilitation, located on the third floor of the **Department of Labor Fox Valley site, 4425 N. Market Street, P.O. Box 9969, Wilmington, DE 19809-0969** to the attention of Daniel Madrid, Vendor Specialist.

**Opening of Proposals:** Sealed proposals will be opened on **December 13th, 2011 at 10:00 a.m.** 3<sup>rd</sup> floor conference room, at the DVR Central Office located in Fox Valley, 4425 North Market Street, Wilmington, Delaware.

**Office of Minority and Women Business Enterprise:**

If you consider yourself a Minority and/or Women Business Owned Enterprise in the State of Delaware, we encourage you to apply to:

Enterprise Business Park  
100 Enterprise Place, Suite 4  
Dover, DE 19904  
SLC: D100  
302-857-4554

<http://gss.omb.delaware.gov/omwbe/index.shtml>

**Please address any questions regarding this Request for Proposals to Daniel Madrid at (302) 761-8275.**

**APPENDIX A**  
**DIVISION OF VOCATIONAL REHABILITATION**  
**DISABILITY DETERMINATION SERVICE-FY 2011-2012**  
**INSTRUCTIONS FOR PROPOSAL - PROFESSIONAL SERVICES - DDS CONSULTATIVE**  
**SERVICES**

**I. INFORMATION FOR OFFERORS**

This packet is designed to assist interested individuals who wish to submit proposals for medical/psychological consultants to the Division of Vocational Rehabilitation (DVR), Disability Determination Service (DDS). The packet provides necessary information to prepare and submit proposals for consideration.

**II. INSTRUCTIONS FOR PROPOSALS**

1. Offerors who submit are encouraged to follow the guidelines provided in this packet. Proposals shall be typewritten. Proposals, to be approved, must conform to the specifications, evaluation criteria, and acceptance requirements set forth in the RFP Package.
2. Four copies of each proposal shall be submitted to DVR in writing, in conformity with and signed by the responsible party for offeror.
3. Proposals shall include:
  - ◆ four copies of an up to date resume or curriculum vitae;
  - ◆ proof of current licensure/accreditation, including business license;
  - ◆ hours/days of service offered at the identified rate per hour;
  - ◆ completed proposal info summary included in the RFP package;
  - ◆ completed W-9.
4. The proposal must be delivered in a sealed package or envelope.
5. Each resume/curriculum vitae shall:
  - ◆ describe offerors experience in SSA Disability Programs and training that is relevant to the services identified in the Request for Proposal;
  - ◆ address the elements of the description of services;
  - ◆ describe your performance history as related to the services in the proposal.

**Price Information.**

Each proposal must state offerors agreement to accept the fee identified in the Description of Services, and identify the number of hours, days, weeks you will be available to provide the services in the proposal.

**Deadline for submitting Proposals.**

The deadline for receipt of four (4) of each sealed proposal is **December 9<sup>th</sup>, 2011 at 4:30 p.m.** at the Central Office, Division of Vocational Rehabilitation, third floor of the Department of Labor, 4425 N. Market Street, P.O. Box 9969, Wilmington, DE 19809-0969 to the attention of Daniel Madrid, Vendor Specialist.

**Evaluation and Selection of Proposals.**

The Disability Determination Service has determined that it is in the best interest of the State to enter into Purchase of Service Agreements with more than one offeror for each DDS service identified in this Request for Proposal as described in Appendix B.

**Awarding Agreements.**

DDS will enter into agreements with all offerors whose proposals are approved no later than December, 13<sup>th</sup>, 2011. The term of the agreements will be from **December 14, 2011 until September 30, 2012.**

**PROPOSAL INFORMATION SUMMARY**

**Name and Address of Offeror**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State

Telephone: H: \_\_\_\_\_ W: \_\_\_\_\_ FAX: \_\_\_\_\_

**Proposal services offered:**

- Psychological Consultative Services
- Psychiatric Consultative Services

**Fee Proposal:**

Price per hour of service offered: **\$75.00**

**Days/Hours of services offered:**

Total weekly hours offered: \_\_\_\_\_

Days/Hours offered: \_\_\_\_\_  
\_\_\_\_\_

**Certificate of information and authorized signature:**

**I hereby certify that to the best of my knowledge all information contained in the application is accurate and complete, that this is a valid proposal and that I am legally authorized to provide the services proposed in Delaware.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

**APPENDIX B  
PROPOSAL EVALUATION/ SCORING**

**Scoring.**

Each proposal will be scored using the selection criteria, and relative points for each section.

**Offeror:** \_\_\_\_\_  
**Service:** \_\_\_\_\_

**Rater:** \_\_\_\_\_

ITEM	SCORE	COMMENTS
<b>A. Responsibility of Offeror.</b>	<b>50%</b>	
Offeror has demonstrated record of performance and integrity with respect to the services in the proposal.  And the relevant experience necessary to provide the services identified in the proposal to include SSA Disability Programs.		
<b>B. Professional Credentials</b>	<b>25 %</b>	
Offeror has appropriate professional credentials.		
<b>C. Hours of Services Offered</b>	<b>25 %</b>	
The hours and times of service offered are competitive and reasonable. Offeror is available when needed.		
<b>Total Score (Possible 100 points)</b>		

**In accordance with the selection criteria, this bid is hereby:**

**1. Likely to be Accepted** \_\_\_\_\_ **2. Recommended for Negotiation** \_\_\_\_\_ **3. Rejected** \_\_\_\_\_

**Reason for rejection:** **1. Non-Responsive/Responsible Offeror** \_\_\_\_ **2. The Proposal is Unacceptable** \_\_\_\_  
**3. The Price is Unreasonable** \_\_\_\_ **4. The Proposal is Not Advantageous to DVR/State** \_\_\_\_\_