



Making Cancer History®

RFP 915357/EE - ADDENDUM 1Bid Closing: **July 2, 2019** at **1:30 PM** (Local Time)

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Bid Number: **915357/EE**Date: **June 14, 2019****BID MUST BE SUBMITTED ON OR ATTACHED TO THIS SIGNED FORM****RETURN BIDS AS SHOWN BELOW****Copies of bid, descriptive literature or supplemental materials required:****Seven (7) Copies****FAX or TELEX Bids Permitted:** ☐ YES ☒ NO**U.S. Mail /Hand Delivery/Express Mail/Courier Service****Address:** (Including Federal Express, UPS, etc.)**The University of Texas MD Anderson Cancer Center****Facilities Planning Design Construction****6900 Fannin , Suite FHB10.1055****Houston, Texas 77030****Attn: Eulalia English****BIDS MUST BE SUBMITTED IN A SEALED ENVELOPE IDENTIFIED BY THE COMPANY NAME. BID NUMBER MUST BE SHOWN ON THE LOWER LEFT HAND CORNER OF THE ENVELOPE.****BIDS MAY BE SUBMITTED AT ANY TIME UNTIL BID CLOSING DATE.****THE UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER RESERVES THE RIGHT TO REJECT ANY AND ALL BIDS OR ANY PART THEREOF.****BIDDER MUST COMPLETE AND SIGN BELOW**

Company Name: _____

Mailing Address: _____

(STREET OR BOX #)

(CITY)

(STATE)

(ZIP)

Telephone No.: _____ / _____

AC

Email Address: _____

(Authorized Signature)

(DATE)

(Typed or Printed Name and Title)

THIS RFP ADDENDUM IS A FURTHERANCE OF A SOLICITATION FOR PROPOSALS AND IS NOT A CONTRACT OR OFFER TO CONTRACT.**G5 LIM PANEL REPLACEMENT**

- 1. Pre-Submittal Sign-In Sheet is attached.**
- 2. HUB Tip Sheet is attached.**

Eulalia English (Sourcing Specialist)**E-Mail address: ecwashin@mdanderson.org**

Supply Chain Management
Pre-Submittal Conference
 Sign-in Sheet

Project Name: G5 LIM Panel Replacement

Project No.: 180025

Location: FHB9.1085

Date: Friday, June 14, 2019

	Printed Name	Company Name or MD Anderson Department	Phone Number/ Extension	E-mail Address	HUB? (Y/N)	GC or Sub?
1	PETER Sanceda	WAYNE ELECTRIC	713-249-0879	Peter@wayneonline.com	N	SUB
2	Pranav Varma	York Construction, Inc.	832 331 8546	rvarma@yorkconstruction.com	N	GC
3	William Carpenter	York Construction, Inc.	832-242-3603	wcarpenter@yorkconstruction.com	N	GC
4	CURTIS LEWIS	MDACC - FPDC	2-8571	CLewis@MDACC.UTX.ORG		
5	Dietrich Kessner	MDA - FHS	2-2401	DKessner@mda.mcm.org	N	
6	Henry Ascencio	BenCor Eng.	832-831-6835	HenryA@BenCor.com	Y	
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Project Name: G5 LIM Panel Replacement

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	Printed Name	Company Name or MD Anderson Department	Phone Number/ Extension	E-mail Address	HUB? (Y/N)	GC or Sub?
13	RAUL BENITEZ	BENCOV ENGINEERING	832.649.1544	RAUL@BENCOV.COM	Y	
14	Eulalia English	UTMDACC	713-792-6775	ecwashington@mdanderson.org		
15	MATT LEINART	HOK	713-623-7937	matt.leinart@hok.com	—	—
16	Mariam Walker	MDACC	713-792-2655 832-405-7809	mwalker2@mdanderson.org	—	—
17	Chris Vest	MDACC	713-792-4984	CC.Vest@mdanderson.org	—	—
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MD Anderson Cancer Center

Supply Chain Management HUB and Federal Small Business Program

Historically Underutilized Business Subcontracting Plans (HSP) Tip Sheet

The Historically Underutilized Business (HUB) Program of The University of Texas MD Anderson Cancer Center (MDACC) was established to identify Historically Underutilized Businesses and encourage them to participate in the competitive bid process with the objective of increasing the number of contracts awarded to HUB vendors.

Helpful Websites & Contacts:

- MDA Bid Opportunities: www4.mdanderson.org/procurement/bids
- Supplier Registration: www.mdanderson.org/suppliers
- Centralized Master Bidder's List (CMBL):
<http://www.window.state.tx.us/procurement/cmb/cmbhub.html>
- Houston Minority Supplier Development Council: <http://hmsdc.org/>
- Women's Business Enterprise Alliance: www.wbea-texas.org

4 HUB Subcontracting Plan Options:

Option 1 - (Method A) Respondent will subcontract with only HUB vendors. (No continuous contract exists with HUB exceeding 5-years in place.)

Option 2 - (Method A) Respondent will subcontract with HUB and non-HUB vendors but the percentage subcontracted to the HUB **meets or exceeds the HUB Goal** the contracting agency identified in the "Agency Special Instructions/Additional Requirements." (No continuous contract exists with HUB exceeding 5-years in place.)

Option 3 - (Method B) Respondent will subcontract with HUB and non-HUB vendors (or only non-HUB vendors), and the aggregate percentage of subcontracting with HUB vendors **does not meet or exceed** the HUB Goal the contracting agency identified in the "Agency Special Instructions/Additional Requirements".

Option 4 - Self-Performance

Completing the Forms

Reference the "HSP Quick Check List" as well as "General Guidelines for Completing HSPs" on page 2 of this document.

Good Faith Effort Determinations (GFE):

Good faith effort applies to Option 3 – Method B.

- Provide written notification to all potential bidders. Notification form is included in the HSP package. Use of this form is highly recommended.
- You must allow HUBs at least seven (7) working days to respond to the notice prior to your submitting your response to the contracting agency (does not include the day notice was sent).
- Notify a minimum of two (2) minority or women trade organizations or development centers of subcontracting opportunities (reference list attached to Rider 104 HUB Plan for contact information).
- Notify a minimum of 3 HUBs for each trade identified for the project.
- Provide written justification of the selection process if a HUB is not selected.
- Include supporting documentation of all GFE (notification and HUB responses).

*****Important:*** Failure to submit required documentation may result in rejection of your HUB Plan and subsequently your proposal. ********

Causes for Rejection:

- Failure to submit a completed HSP
- Failure to provide 7 (seven) working day notice to HUBs
- Failure to properly notify HUBs and/or provide sufficient information to bid
- Failure to notify minimum of two trade organizations
- Failure to include supporting documentation of all Good Faith Efforts
- Telephone logs are not accepted as documentation of good faith efforts; only fax, e-mail and written correspondence are acceptable

General Guidelines for Completing HSPs

Read completely the HSP Rider 104 provided in the solicitation.

To enhance the successful outcome of review of the HSP, MD Anderson offers the option to submit the HSP for a complimentary review. The HSP must be filled out in its' entirety to be eligible for a courtesy draft review. Place "Draft HSP" in your subject line of the email and submit no later than 48 hours in advance of the solicitation due date. The courtesy review is contingent upon HUB Program staff availability and is limited to one per vendor per solicitation.

Should you encounter a unique situation that has not been addressed, contact the HUB Program office. In addition, a video short is available emphasizing important points to follow.

Training Video

To access the training video, visit: www.mdanderson.org/hub

- Select "Subcontracting Program"
- Select "Training Video Overview of Rider 104"

Following the Award:

Notification of Award to Subcontractors: Within ten (10) days following signing of the contract, contractor must notify in writing the subcontractors of their award (Section 4 Affirmation); copy of the notice must also be provided to the contracting agency's point of contact for the contract.

Reporting: If subcontracting, Progress Assessment Reports (PARs) will be required monthly, by the 10th of the month, documenting payments to all subcontractors, HUB and non-HUB.

HUB & Federal Small Business Program Staff:

Contact staff identified below for HUB related questions, assistance with HSP forms, HSP draft review or prime contractor HUB training please contact:

Construction/Campus Operations

Barbara Howard, Sr. HUB Coordinator

713-794-3211 bhoward@mdanderson.org

Non-construction Related Solicitations

Marian Nimon, Associate Director

713-745-8352 mnimon@mdanderson.org

Completing the Forms: HSP Quick Check List

While this HSP Quick Checklist is being provided to assist you in readily identifying sections of the HSP form that you will need to complete, it is very important that you adhere to the instructions in the HSP form and instructions provided by the contracting agency.

Option 1 (Method A) Section 2(c) of HSP

If all of your subcontracting opportunities will be performed using only HUB vendors, complete:

- ✓ Section 1 - Respondent and Requisition Information
- ✓ Section 2 a. – Yes, I will be subcontracting portions of the contract
- ✓ Section 2 b. – List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to HUB vendors
- ✓ Section 2 c. – Yes
- ✓ Section 4 – Affirmation
- ✓ GFE Method A (Attachment A) – Complete this attachment for each subcontracting opportunity

Option 2 (Method A) Section 2(d) of HSP

☐ If you are subcontracting with HUB vendors and Non-HUB vendors, and the aggregate percentage* of subcontracting with HUB vendors (*with which you have a continuous contract in place for five (5) years or less*) meets or exceeds the HUB Goal the contracting agency identified in the “Agency Special Instructions/Additional Requirements”, complete:

- ✓ Section 1 - Respondent and Requisition Information
- ✓ Section 2 a. – Yes, I will be subcontracting portions of the contract
- ✓ Section 2 b. – List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to HUB vendors and Non HUB vendors
- ✓ Section 2 c. – No
- ✓ Section 2 d. – Yes
- ✓ Section 4 – Affirmation
- ✓ GFE Method A (Attachment A) – Complete this attachment for each subcontracting opportunity

Option 3 (Method B) Section B 1-4 of HSP

If you are subcontracting with HUB vendors and Non-HUB vendors (or only Non HUB vendors), and the aggregate percentage* of subcontracting with HUB vendors (*with which you have a continuous contract in place for five (5) years or less*) does not meet or exceed the HUB Goal the contracting agency identified in the “Agency Special Instructions/Additional Requirements”, complete:

- ✓ Section 1 - Respondent and Requisition Information
- ✓ Section 2 a. – Yes, I will be subcontracting portions of the contract
- ✓ Section 2 b. – List all the portions of work you will subcontract, and indicated the percentage of the contract you expect to award to HUB vendors and Non HUB vendors
- ✓ Section 2 c. – No
- ✓ Section 2 d. – No
- ✓ Section 4 – Affirmation
- ✓ GFE Method B (Attachment B) – Complete this attachment for each subcontracting opportunity

Option 4: Self-Performance, Section 3 of HSP

If you are not subcontracting any portion of the contract and will be fulfilling the entire contract with your own resources, complete:

- ✓ Section 1 – Respondent and Requisition Information
- ✓ Section 2 a. – No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources
- ✓ Section 3 – Self Performing Justification
- ✓ Section 4 – Affirmation