



NOT-FOR-PROFIT HOSPITAL CORPORATION

2018 JUL -3 PM 12:27

OFFICE OF THE  
SECRETARY

July 3, 2018

The Honorable Phil Mendelson  
Chairman, Council of the District of Columbia  
John A. Wilson Building  
1350 Pennsylvania Avenue, N.W.  
Suite 504  
Washington, DC 20004

Dear Chairman Mendelson:

Enclosed for consideration and approval by the Council of the District of Columbia is Contract No. NFPHC-2018-435-A between the Not-for-Profit Hospital Corporation and GW Medical Faculty Associates, Inc Approval and Payment Authorization Emergency Act of 2018, and Contract No. NFPHC-2018-435-A between the Not-for-Profit Hospital Corporation and GW Medical Faculty Associates, Inc Approval and Payment Authorization Emergency Declaration Resolution of 2018 for the provision of emergency department services ("Contract").

Council action is necessary to approve the FY 18 portion of this Contract (April 1-September 30, 2018) in the amount of \$4,407,762.00, and repeal Council's previous approval of CA22-408, which had a calculation error. Per the contract, the parties will address the FY 19 portion in a subsequent modification.

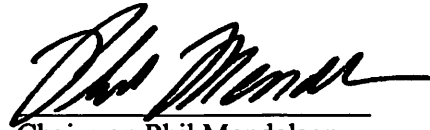
As always, I am available to discuss any questions you may have regarding this proposed Contract. In order to facilitate a response to any questions you may have, please have your staff contact me at (202) 574-6611. I look forward to a favorable consideration on this measure.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew Hamilton". The signature is fluid and cursive, with the first name being more prominent.

Matthew Hamilton  
Chief Executive Officer  
Not-for-Profit Hospital Corporation

Enclosure



Chairman Phil Mendelson  
on behalf of the Not-for-Profit  
Hospital Corporation

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A BILL

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IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

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To approve, on an emergency basis, Contract No. NFPHC-2018-435-A between the Not-for-Profit Hospital Corporation, commonly known as United Medical Center (“Hospital”) and George Washington University Medical Faculty Associates, Inc., (“GW MFA”) to provide emergency department services to the Hospital, to authorize payment for the services received and to be received under the Revised Contract, and to repeal CA22-408.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA,

That this act may be cited as the “Contract No. NFPHC-435-A between Not-for-Profit Hospital Corporation and GW Medical Faculty Inc Approval and Payment Authorization Emergency Amendment Act of 2018”.

Sec. 2. Pursuant to section 451 of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 803; D.C. Official Code § 1-204.51), and notwithstanding the requirements of section 202 of the Procurement Practices Reform Act of 2010, effective April 8, 2011 (D.C. Law 18-371; D.C. Official Code § 2-352.02), the Council repeals CA22-408, approves Contract No. NFPHC-435-A between the Not-for-Profit Hospital Corporation and GW MFA, to provide emergency department services

36 to the Hospital, and authorizes payment for the services received and to be received under  
37 the Revised Contract and payment in the amount of \$4,407,762.00.

38           Sec. 3. Fiscal impact statement.

39           The Council adopts the fiscal impact statement of the Chief Financial Officer as  
40 the fiscal impact statement required by section 4a of the General Legislative Procedures  
41 Act of 1975, approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-  
42 301.47a).

43           Sec. 4. Effective date.

44           This act shall take effect following approval by the Mayor (or in the event of veto  
45 by the Mayor, action by the Council to override the veto), and shall remain in effect for  
46 no longer than 90 days, as provided for emergency acts of the Council of the District of  
47 Columbia in section 412(a) of the District of Columbia Home Rule Act, approved  
48 December 24, 1973 (87 Stat. 788; D.C. Official Code § 1-204.12(a)).

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**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
**Office of Contracting and Procurement**



Pursuant to section 202(c-1) of the Procurement Practices Reform Act of 2010, as amended, D.C. Official Code § 2-352.02(c-1), the following contract summary is provided:

**COUNCIL CONTRACT SUMMARY**

(Retroactive)

**(A) Contract Number:** NFPHC-2018-435-A

**Proposed Contractor:** GW Medical Faculty Associates, Inc (ED Services)

**Contract Amount:** \$4,407,762.00

**Unit and Method of Compensation:** Monthly with proper invoices

**Term of Contract:** One year contract, funded for only 6 months (April 1 – Sept 30, 2018)

**Type of Contract:** Fixed, with monthly reconciliations

**Source Selection Method:** Competitive Procurement

**(B) For a contract containing option periods, the contract amount for the base period and for each option period. If the contract amount for one or more of the option periods differs from the amount for the base period, provide an explanation of the reason for the difference:**

FY 18 Base Period Amount: \$4,407,762.00 (6 months)

FY 19 Option Base Period: \$4,407,762.00 (6 months)

Option Year 1 Amount: \$8,815,524.00

Explanation of difference from base period (if applicable):

Option Year 2 Amount: \$ 8,815,524.00

Explanation of difference from base period (if applicable):

Option Year 3 Amount: \$ 8,815,524.00

Explanation of difference from base period (if applicable):

Option Year 4 Amount: \$8,815,524.00

Explanation of difference from base period (if applicable):

**(C) The goods or services to be provided, the methods of delivering goods or services, and any significant program changes reflected in the proposed contract:**

GW MFA has been selected to provide emergency medical service coverage at UMC twenty-four (24) hours per day, seven (7) days per week. Staffing may be accomplished using Mid- Level Providers (as defined in the proposed Contract), as well as physicians. Subject to the Hospital's approval, GW MFA shall designate a physician to serve as Chair of the Emergency Department and Chief of Emergency Medicine for the Hospital.

Generally, the Contractor shall perform all clinical and administrative tasks assigned under the Contract, including, but not limited to: assessing and providing the necessary physician orders to stabilize, treat and make admission/discharge decisions for patients presenting to the ED; provide real-time clinical supervision of all Contractor mid-level providers; oversee the transition of patients from ED to inpatient care; participating in performance improvement, patient safety and other quality improvement programs; assisting the CMO in establishing and evaluating ED policies, procedures, and protocols; and managing all ED issues on a daily basis. The Contractor's specific performance metrics are outlined in the proposed Contract and cover areas, such as ED wait times, ED rounding, hand off procedures to and from ED physicians, post treatment contract with patients, handwashing, percentage of patients that left the ED before being seen, mitigating and managing sepsis, and the development, implementation and ongoing assessment of standardized evidence-based clinical protocols/pathways.

**(D) The selection process, including the number of offerors, the evaluation criteria, and the evaluation results, including price, technical or quality, and past performance components:**

On October 2, 2017, the RFP was issued by direct email to about fifteen (15) vendors, including CBEs from DLSBD's website. Fourteen (14) proposals were received by the October 9, 2017 due date.

Technical Evaluation Process.

The proposals were independently evaluated by a panel in accordance with the RFP criteria.

The general categories are below:

Technical Evaluation Factors	Points
Relevant Experience and References	25
Project Management Plan & Statement of work	30
Key Personnel	25
Price	20

On October 9, 2017, after all presentations were complete, the RFP Evaluation Committee met to develop consensus on the technical scores. All notes and score sheets were/are maintained by the UMC Board.

Combined Technical and Pricing Scores

As noted in the rules and policies of UMC and the District government, the expressly stated that, “the contract will be awarded to the responsible offeror whose offer is most advantageous to UMC, based upon the evaluation criteria specified below.” Thus, while the points in the evaluation criteria indicate their relative importance, the total scores will not necessarily be determinative of the award. Rather, the total scores will guide the RFP Issuer in making an intelligent award decision based upon the evaluation criteria.

Recommendation

After an October 9, 2017 full discussion of the scores and consideration of what would be most advantageous for UMC and the population served, the evaluation panel recommended the hospital proceed with GW Medical Faculty Associates.

Board and Previous Council Reviews.

The evaluation panel’s recommendation was accepted by the UMC Board’s Finance Committee on December 19, 2017, and the full board on December 27, 2017. The proposed contract package will be submitted to Council for a passive 10-day review period.

The original contract package will be approved by Council on March 18, 2018 (CA 22-408). Current Council review is being requested to correct an error that was discovered after the initial Council approval (See Emergency Declaration Resolution). With this action, we are also requesting repeal of the initial contract (CA 22-408).

The Board stands ready to work with the Executive, Council, UMC, and the community it serves, to best position GW MFA for success.

- (E) A description of any bid protest related to the award of the contract, including whether the protest was resolved through litigation, withdrawal of the protest by the protestor, or voluntary corrective action by the District. Include the identity of the protestor, the grounds alleged in the protest, and any deficiencies identified by the District as a result of the protest:**

As of the date of filing, no bid protest has been filed.

- (F) The background and qualifications of the proposed contractor, including its organization, financial stability, personnel, and performance on past or current government or private sector contracts with requirements similar to those of the proposed contract:**

Medical Faculty Associates, Inc. – Background and Qualifications

Medical Faculty Associates, Inc. ("MFA") is a leading healthcare provider across the Washington Metropolitan region. MFA serves as the administrative and contracting organization for The George Washington University's ("GWU") 800 academic and community physicians. With experts across over 50 clinical specialty and subspecialty areas, MFA serves patients and families from across the Washington Metropolitan region. MFA faculty provides services to many communities and health care institutions including The George Washington University Hospital, Children's National Health System, Walter Reed National Military Medical Center, INOVA Health and more. MFA provides a variety of office and hospital-based services for adult patients including Emergency Medicine, Hospitalist, Radiology, Anesthesiology, Critical Care, Pathology, Obstetrics and Gynecology, Pain Management, Psychiatric, and Surgical services.

#### Description and Organizational Philosophy

MFA is a 501(c)(3), not-for-profit, locally controlled, physician-led tax-exempt organization. MFA has over 2,150 employees and is comprised of 13 clinical Departments that make up a large integrated multispecialty group. Affiliated with The George Washington University, MFA has grown to become one of the largest independent physician practices. Affiliated with The George Washington School of Medicine and Health Sciences ("GWSMHS"), MFA is committed to the goals of providing superior healthcare, advancing knowledge and training future caregivers. MFA's physicians teach and mentor medical students, residents and researchers at GWSMHS which was the first medical school in the nation's capital and the eleventh oldest in the United States.

#### Executive Leadership

The MFA is led by Drs. Anton Sidawy and Robert Kelly. Dr. Sidawy serves as the MFA Chair of the Board of Trustees. He also serves as the Chair of the Department of Surgery. Dr. Kelly serves as the Chief Executive Officer. Dr. Kelly previously served as President and COO of the New York-Presbyterian Hospital and Healthcare System.

#### Clinical Leadership

For over thirty years, the MFA's Department of Emergency Medicine (the "GWDEM") has been a national leader in the field of academic emergency medicine. The GWDEM has extensive experience in providing contract medical services to a variety of clients including community hospital settings. Dr. Robert Shesser, Chair of the Department of Emergency Medicine, will be responsible for providing oversight for the UMC's Emergency Department to ensure optimal success. He directly oversees 50 physicians, 20 midlevels, in addition to a team of paramedics and an administrative staff. Dr. Shesser is also a tenured Professor of Emergency Medicine, Medicine, and International Health at GWSMHS.

The MFA's Department of Medicine is one of the nation's leading programs for training future internists as well as an array of subspecialists such as cardiologists, gastroenterologists, pulmonologists and others. The Department has 130 faculty members across 12 Specialty Divisions. Each year, the faculty care for 86,000 inpatient encounters as well as over 210,000 outpatient encounters. Dr. Alan Wasserman is the Eugene Meyer Professor of Medicine and Chairman of the Department of Medicine. He will be responsible for providing oversight for the UMC's Hospitalist Services to ensure optimal success.

#### MFA Financial Stability and Satisfaction of Contractual Obligations

The MFA organization benefits from local leadership, professional managers, financial stability and good creditworthiness. MFA has significant financial reserves, local banking relationships and strong credit references. With a Board of Directors with outside members, MFA employs generally accepted accounting principles (GAAP) and annual audits are performed. MFA has never defaulted on its financial obligations and has successfully satisfied professional service requirements similar to those of the proposed contract.

**(G) The period of performance associated with the proposed change, including date as of which the proposed change is to be made effective:**

The period of performance is April 1, 2018 – September 20, 2018.

**(H) The value of any work or services performed pursuant to a proposed change for which the Council has not provided approval, disaggregated by each proposed change if more than one proposed change has been aggregated for Council review:**

Since April 1, the value of the work is \$1,469,254.00

**(I) The aggregate dollar value of the proposed changes as compared with the amount of the contract as awarded:**

N/A

**(J) The date on which the contracting officer was notified of the proposed change:**

March 16, 2018

**(K) The reason why the proposed change was sent to Council for approval after it is intended to take effect:**

Please see section D of this summary and the attached Emergency Declaration resolution.

**(L) The reason for the proposed change:**

To correct an error made by parties that was discovered after the original contract.

**(M) The legal, regulatory, or contractual authority for the proposed change:**

NFPHC Contracting Authority; NFPHC Establishment Act; Home Rule Act

**(N) A summary of the subcontracting plan required under section 2346 of the Small, Local, and Disadvantaged Business Enterprise Development and Assistance Act of 2005, as amended, D.C. Official Code § 2-218.01 *et seq.* (“Act”), including a certification that the subcontracting plan meets the minimum requirements of the Act and the dollar volume of the portion of the**



**contract to be subcontracted, expressed both in total dollars and as a percentage of the total contract amount:**

A subcontracting plan was not required for this RFP due the critical need and highly specialized nature of the services to be provided under this proposed Contract. UMC continues to make best efforts to create and maintain opportunities for small, local, and disadvantaged business at UMC across all areas of the hospital, and looks forward to working with the community and applicable agencies to improve in this area.

**(O) Performance standards and the expected outcome of the proposed contract:**

The Contractor's performance will be monitored by the Not-for-Profit Hospital Corporation CEO and CMO. The performance standards are as outlined in the proposed Contract and as required by applicable local, federal, industry, and licensing entities.

**(P) The amount and date of any expenditure of funds by the District pursuant to the contract prior to its submission to the Council for approval:**

Since April 1, the value of the work is \$1,469,254.00. The expenditure is none to date, but the hospital is in receipt of the invoice for April and May totaling \$1,469,254.00.

**(Q) A certification that the proposed contract is within the appropriated budget authority for the agency for the fiscal year and is consistent with the financial plan and budget adopted in accordance with D.C. Official Code §§ 47-392.01 and 47-392.02:**

See attached fiscal certification from the OCFO.

**(R) A certification that the contract is legally sufficient, including whether the proposed contractor has any pending legal claims against the District:**

See attached legal sufficiency from UMC outside counsel.

**(S) A certification that Citywide Clean Hands database indicates that the proposed contractor is current with its District taxes. If the Citywide Clean Hands Database indicates that the proposed contractor is not current with its District taxes, either: (1) a certification that the contractor has worked out and is current with a payment schedule approved by the District; or (2) a certification that the contractor will be current with its District taxes after the District recovers any outstanding debt as provided under D.C. Official Code § 2-353.01(b):**

Please see attached Citywide Clean Hands.

**(T) A certification from the proposed contractor that it is current with its federal taxes, or has worked out and is current with a payment schedule approved by the federal government:**

The proposed contractor has certified its compliance.

- (U) The status of the proposed contractor as a certified local, small, or disadvantaged business enterprise as defined in the Small, Local, and Disadvantaged Business Enterprise Development and Assistance Act of 2005, as amended, D.C. Official Code § 2-218.01 *et seq.*:**

The Contractor is not certified as a local, small, or disadvantaged business enterprise.

- (V) Other aspects of the proposed contract that the Chief Procurement Officer considers significant:**

All relevant aspects of the proposed Contract are enclosed.

- (W) A statement indicating whether the proposed contractor is currently debarred from providing services or goods to the District or federal government, the dates of the debarment, and the reasons for debarment:**

As of February 14, 2018, the Contractor does not appear on the District or Federal Excluded Parties List.

- (X) Any determination and findings issues relating to the contract's formation, including any determination and findings made under D.C. Official Code § 2-352.05 (privatization contracts):**

None.

- (Y) Where the contract, and any amendments or modifications, if executed, will be made available online:**

The Hospital's website is currently being upgraded and the hospital intends to post the executed contract as soon as possible. Until then, the RFP remains available onsite.

- (Z) Where the original solicitation, and any amendments or modifications, will be made available online:**

The Hospital's website is currently being upgraded and the hospital intends to post the solicitation as soon as possible. Until then, the RFP remains available onsite.



**Government of the District of Columbia**

## **CERTIFICATE OF CLEAN HANDS**

**MEDICAL FACULTY ASSOCIATES INC  
2150 PENNSYLVANIA AVE NW  
WASHINGTON, DC 20037-3201**

**EIN : \*\*\*\*\*0700**

**As reported in the Citywide Clean Hands system, the above referenced individual or entity has no outstanding liability with the District of Columbia. As of the date herein, you have complied with the following official DC code and therefore are issued this Certificate of Clean Hands.**

**TITLE 47. TAXATION, LICENSING, PERMITS, ASSESSMENTS AND FEES  
CHAPTER 28. GENERAL LICENSE LAW  
SUBCHAPTER II. CLEAN HANDS BEFORE RECEIVING A LICENSE OR PERMIT  
D.C. Code § 47-2862 (2006)  
§ 47-2862. Prohibition against issuance of license or permit.**

A handwritten signature in blue ink, appearing to read 'Doris Faulkner', positioned above a horizontal line.

**Authorized By Doris Faulkner  
Acting Chief of Collections**

**Date: Tuesday this 12th day of June 2018 09:59 AM**

**Tracking#: 839695**

**This document is a certified, complete and true copy.**

**Government of the District of Columbia  
Office of the Chief Financial Officer**



**MEMORANDUM**

**To:** Matthew Hamilton, Chief Executive Officer  
**CC:** Marcela Maamari, VP Support Services & Contracting Officer  
**From:** Lilian Chukwuma, CFO -- Not-for-Profit Hospital Corporation  
**Date:** July 2, 2018

A handwritten signature in blue ink, appearing to be 'LHC', is written over the 'From:' line of the memorandum.

**Re:** **Contract No. NFPHC-2018-435-A between the Not-for-Profit Hospital Corporation and GW Medical Faculty Associates, Inc Approval and Payment Authorization Emergency Act of 2018, and Contract No. NFPHC-2018-435-A between the Not-for-Profit Hospital Corporation and GW Medical Faculty Associates, Inc Approval and Payment Authorization Emergency Declaration Resolution of 2018**

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The Not-for-Profit Hospital Corporation (NFPHC) intends TO contract with GW Medical Faculty Associates, Inc. for Emergency Department Services. **The total FY 18 cost is \$4,407,762.00**

The Office of the Chief Financial Officer hereby certifies that the funds are included in the NFPHC FY 2018 approved budget. All funds proposed under this contract for FY 2018 are contingent upon the approval of the NFPHC FY 2018 Appropriated Budget.