

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



Pursuant to section 202(c-3) of the Procurement Practices Reform Act of 2010, as amended, D.C. Official Code § 2-352.02(c-3), the following contract summary is provided:

**COUNCIL CONTRACT SUMMARY**  
**(Tipping )**

- (A) **Contract Number:** CW101660
- Proposed Contractor:** Mentor ABI, LLC- Neurorestorative
- Contract Amount (Option Period One):** Not-to-exceed (NTE) \$1,048,200
- Unit and Method of Compensation:** Fixed unit price with cost reimbursement component
- Term of Contract:** November 10, 2023 – November 9, 2024
- Type of Contract:** Human Care Agreement under which task orders (contract) are to be issued for District requirements.
- Source Selection Method:** Exempt from Competition

(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:**

**Base Period Amount:** NTE \$991,500  
(November 10, 2022 through November 9, 2023)

**Option Period One Amount:** NTE \$1,048,200  
(November 10, 2023 through November 9, 2024)

**Explanation of difference from base period (if applicable):** Option period one is higher than the base period due to the need to move one consumer to higher level of medical and psychiatric treatment.

**Option Period Two Amount:** NTE \$991,500  
(November 10, 2024 through November 9, 2025)

**Option Period Three Amount: NTE \$991,500  
(November 10, 2025 through November 9, 2026)**

**Option Period Four Amount: NTE \$991,500  
(November 10, 2026 through November 9, 2027)**

**(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:**

The provider will provide post-acute rehabilitation medical services and neurobehavioral programs for three consumers in the care of the Department of Behavioral Health (DBH). The consumers are in need of specialized treatment for behavioral disturbance due to a traumatic brain injury. In option year one, one consumer was moved to higher level of treatment due to changes in his medical need as required for medical and psychiatric stabilization which increased the price of the option year.

**(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:**

This procurement is exempt from competition as defined by PPRA Section 413 (2) Competition Exemption for “commodities or contractual services if federal or District law prescribes with whom the District must contract.” The District has been court ordered to provide inpatient treatment for the three District residents at the current facility where they reside. Mentor ABI, LLC- Neurorestorative is the current provider qualified to provide the inpatient services to meet the requirements of the court orders and has the necessary specialized education, training and experience.

**(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:**

None

**(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:**

Mentor ABI, LLC- Neurorestorative is an experienced provider of post-acute rehabilitation medical services and neurobehavioral programs and has the necessary organizational structure, resources, experience, technical skills, and operational controls to perform the requirements of the Human Care Agreement (HCA). Mentor ABI, LLC- Neurorestorative has demonstrated knowledge and experience working with the consumer population to support successful outcomes for DBH consumers. Furthermore, the provider is licensed by the Commonwealth of Virginia Department of Behavioral Health and Developmental Services to provide brain injury and developmental disabilities services and as a brain injury residential treatment center for adults. Mentor ABI, LLC- Neurorestorative has been providing satisfactory services to the District to meet the requirements of the 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 associated with the proposed change is November 10, 2023 through November 9, 2024.

**(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:**

Option year one is currently partially exercised and below are the modifications.

Modification No. M0002: NTE \$497,100

Modification No. M0003: Increased funding by \$54,000

Modification No. M0004: Increased funding by \$248,900

Proposed Modification No. M0005: Exercises the remainder of option year one and add \$248,200

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

Aggregate Dollar Value: \$1,048,200

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

The contracting officer was notified by program on November 3, 2023 that one of the individuals receiving care under this HCA needed a higher level of treatment.

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

The contracting officer was notified by DBH of the need to move one consumer to a higher level of treatment due to changes in his medical need as required for medical and psychiatric stabilization without sufficient time to seek Council approval for the increased price of option year one. The contracting officer determined it was in the best interest of the District to partially exercise option year one to allow for sufficient time to obtain Council approval. The proposed change is being requested to allow for the continuation of services for consumers who need rehabilitation medical services and neurobehavioral programs.

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

The contracting officer was notified by DBH of the need to move one consumer to a higher level of treatment due to changes in his medical need as required for medical and psychiatric stabilization which increased option year one's value to exceed one million dollars.

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

The proposed change is in accordance with 27 DCMR Chapter 20, section 2008, "Exercise of Options".

- (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 waiver request WR-4811 for partial year one of the HCA was approved by DSLBD on September 6, 2023. An updated waiver request WR-5060 for the update HCA value was approved by DSLBD on January 2, 2024.

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

The provider shall provide post-acute rehabilitation medical services and neurobehavioral programs for three consumers in the care of DBH. The expected outcome of the HCA is the consumers will receive specialized treatment that will improve their quality of life, mental and physical health, and wellbeing.

- (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:**

\$497,100, November 9, 2023

\$54,000, November 16, 2023

\$248,900, April 5, 2024

- (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:**

The DBH Agency Fiscal Officer has certified that funding in the amount of \$1,048,200 is available.

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

The Office of the Attorney General has determined that the HCA is legally sufficient, and that the provider has no pending legal claims against the District.

- (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):**

The Citywide Clean Hands database indicates that the proposed provider is current with its District taxes as of May 1, 2024.

- (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 provider has self-certified, via Bidder/Offeror certification form, that it is current with its federal taxes.

- (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 provider is not a District certified local, small, or disadvantaged business enterprise.

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

None

- (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:**

The provider is not currently debarred from providing services to any government entity. The provider does not appear as an excluded party on the District Excluded Parties List, the Office of the Inspector General Exclusions Database, or the 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):**

Determination and Findings for Contractor Responsibility

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

<http://ocp.dc.gov>

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

<http://ocp.dc.gov>



Date of Notice: May 1, 2024

Notice Number: L0011757311

MENTOR ABI, LLC  
1510 SENECA DR  
BLACKSBURG VA 24060-2464

FEIN: \*\*-\*\*\*8422  
Case ID: 5055603



### CERTIFICATE OF CLEAN HANDS

As reported in the Clean Hands system, the above referenced individual/entity has no outstanding liability with the District of Columbia Office of Tax and Revenue or the Department of Employment Services. As of the date above, the individual/entity has complied with DC Code § 47-2862, therefore this Certificate of Clean Hands is issued.

TITLE 47. TAXATION, LICENSING, PERMITS, ASSESSMENTS, AND FEES  
CHAPTER 28 GENERAL LICENSE  
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

Authorized By Melinda Jenkins

Branch Chief, Collection and Enforcement Administration

To validate this certificate, please visit [MyTax.DC.gov](https://MyTax.DC.gov). On the MyTax DC homepage, click the “Validate a Certificate of Clean Hands” hyperlink under the Clean Hands section.


**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT OF BEHAVIORAL HEALTH**




**Office of the Chief Financial Officer**

**MEMORANDUM**

**TO:** Habibatu Jalloh  
Contracting Officer  
Office of Contracting and Procurement

**THRU:** Delicia V. Moore  
for Associate Chief Financial Officer   
Human Support Services Cluster

**FROM:** Adran Reid For   
Agency Fiscal Officer  
Department of Behavioral Health

**DATE** April 30, 2024

**SUBJECT:** Certification of Funding availability for \$1,048,200

The Office of the Chief Financial Officer hereby certifies that the sum of \$1,048,200 is included in the District's Local Budget and Financial Plan for Fiscal Year 2024 and 2025 to fund the costs associated with the Department of Behavioral Health contract with Mentor ABI, LLC- Neurorestorative for post-acute rehabilitation medical services. This certification supports the Mentor ABI, LLC- Neurorestorative contract during the period from November 10, 2023, through November 9, 2024. The fund allocation is as follows:

**Vendor:** Mentor ABI, LLC- Neurorestorative

**Contract #:** CW101660

**Fiscal Year 2024 Funding:** 11/10/2023 - 09/30/2024

Fund	Program	Cost Center	Account	Project	Subtask	Award	Amount
1010001	700317	70439	7132001	202175	38.80	100579	\$495,841.00
1010001	700286	70424	7141007	202175	65.13	100579	\$143,800.00
1010001	700305	70425	7141002	202175	66.20	100579	\$297,004.00
<b>FY 2024 Contract Total:</b>							<b>\$936,645.00</b>

**Fiscal Year 2025 Funding:** 10/01/2024 - 11/9/2024

Agency	Fund	Program	PCA	Account	Project	Award	Amount
RM0	101001	700317	70439	7132001		100579	\$111,555.00

<b>FY 2025 Contract Total:</b>							<b>\$111,555.00</b>

Upon approval of the District’s Local Budget and Financial Plan by the Council and the Mayor and completion of the thirty-day Congressional layover, funds will be sufficient to pay for fees and costs associated with the contract. There is no fiscal impact associated with the contract.

Should you have any questions, please contact Adran Reid, Agency Fiscal Officer at (202) 671-3393.



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
Office of the Attorney General



ATTORNEY GENERAL  
BRIAN L. SCHWALB

Commercial Division

**MEMORANDUM**

**TO: Tomás Talamante**  
**Director**  
**Office of Policy and Legislative Affairs**

**FROM: Robert Schildkraut**  
**Section Chief**  
**Government Contracts Section**

**SUBJECT: Approval of Contract Option Year Exercise for Post-Acute Rehabilitation**  
**Medical and Neurobehavioral Services**  
**Contractor: Mentor ABI, LLC**  
**Contract Number: CW101660**  
**Contract Amount: NTE \$1,048,200.00**

---

This is to Certify that this Office has reviewed the above-referenced Contract and that we have found it to be legally sufficient.

If you have any questions in this regard, please do not hesitate to call me at (202) 724-4018.

*Robert Schildkraut*

---

**Robert Schildkraut**

<b>AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>			1. Contract Number CW101660		Page of Pages 1   1		
2. Amendment/Modification Number M0002		3. Effective Date 11/10/2023		4. Requisition/Purchase Request No.		5. Solicitation Caption Post-Acute Rehabilitation Medical Services	
6. Issued by: Office of Contracting and Procurement (OCP) On behalf of the Department of Behavioral Health 64 New York Avenue, NE, 2nd Floor West Washington, DC 20002				Code [ ]			
				7. Administered by (If other than line 6) Department of Behavioral Health (DBH) 64 New York Ave NE Washington, DC 20002 Phone: (202) 673-2200 Email: <a href="mailto:dbh@dc.gov">dbh@dc.gov</a>			
8. Name and Address of Contractor (No. street, city, county, state and zip code) Mentor ABI, LLC- Neurorestorative 1510 Seneca Dr Blacksburg, VA 24073  E-Mail: <a href="mailto:Valerie.Palermo@sevitahealth.com">Valerie.Palermo@sevitahealth.com</a> Phone: 617-790-4837						9A. Amendment of Solicitation No.	
						9B. Dated (See Item 11)	
				X		10A. Modification of Contractor/Order No. CW101660	
						10B. Dated (See Item 13) 11/10/2022	
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS							
<input 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. Offers 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 one (1) copy 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 CONTRACTORS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14							
A. This change order is issued pursuant to (Specify Authority): 27 DCMR, Chapter 36, Contract Modifications The changes set forth in Item 14 are made in the contract/order no. in item 10A.							
X 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 § 3601.3							
C. This supplemental agreement is entered into pursuant to authority of: 27 DCMR § 3601.2							
D. Other: Exercise of Option, pursuant to the authority of: 27 DCMR § 3601.3 (c)							
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not required <input type="checkbox"/> is required to sign this document and return ____ copy to the issuing office.							
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.)  The purpose of this Contract Modification for the above referenced Contract is to:  A. In accordance with 27 DCMR § 2008 and Section F.3 Option to Extend Term of the Agreement, Option Year One is hereby partially exercised for the period of performance from November 10, 2023 to May 9, 2024 in the not-to-exceed amount of \$497,100.  B. Continuation of services for the FY2024 period of performance November 10, 2023 through May 9, 2024 is pending availability of funds which will be reflected in a District issued purchase order. Funding beyond May 9, 2024 is contingent on the availability of funds for FY2024.							
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 Laura Vargas			
15B. Name of Contractor		15C. Date Signed		16B. District of Columbia  <i>Laura Vargas</i> (Signature of Contracting Officer)		16C. Date Signed 11/09/2023	
(Signature of person authorized to sign)							

<b>AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>		1. Contract Number CW101660		Page of Pages 1   3	
2. Amendment/Modification Number M0003		3. Effective Date See 16C. below		4. Requisition/Purchase Request No.	
		5. Solicitation Caption Post-Acute Rehabilitation Medical Services			
6. Issued by: Office of Contracting and Procurement (OCP) On behalf of the Department of Behavioral Health 64 New York Avenue, NE, 2nd Floor West Washington, DC 20002			7. Administered by (If other than line 6) Department of Behavioral Health (DBH) 64 New York Ave NE Washington, DC 20002 Phone: (202) 673-2200 Email: dbh@dc.gov		
8. Name and Address of Contractor (No. street, city, county, state and zip code) Mentor ABI, LLC- Neurorestorative 1510 Seneca Dr Blacksburg, VA 24073 Telephone: 617-790-4837 E-Mail: Valerie.Palermo@sevitahealth.com			9A. Amendment of Solicitation No.		
			9B. Dated (See Item 11)		
			10A. Modification of Contractor/Order No. CW101660		
			X		
			10B. Dated (See Item 13) 11/10/2022		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input 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. Offers 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 one (1) copy 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 CONTRACTORS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14					
A. This change order is issued pursuant to (Specify Authority): 27 DCMR, Chapter 36, Contract Modifications 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 § 3601.3 (a)					
X C. This supplemental agreement is entered into pursuant to authority of: 27 DCMR § 3601.2					
D. Other: Exercise of Option, pursuant to the authority of: 27 DCMR § 3601.3 (c)					
<b>E. IMPORTANT:</b> Contractor <input type="checkbox"/> is not required <input checked="" type="checkbox"/> is required to sign this document and return one (1) copy to the issuing office.					
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.)  The purpose of this Contract Modification for the above referenced Contract is to:  A. Add section C.2.6 below.  C.2.6 The Contractor shall provide a treatment program in a locked facility that is an agent of the Contractor to facilitate medication changes as required for medical and psychiatric stabilization for one consumer. The Contractor shall complete the medication changes as recommended by the Contractor's consulting neuropsychiatrist. Therapeutic programming and service provision for individuals with traumatic brain injury and psychiatric care and treatment shall be provided at this program to support the consumer during the placement.					
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) Jane Imboden Vice President of Operations			16A. Name of Contracting Officer Laura Vargas		
15B. Name of Contractor  <i>Jane Imboden</i> (Signature of person authorized to sign)		15C. Date Signed  Nov 16, 2023	16B. District of Columbia  <i>Laura Vargas</i> (Signature of Contracting Officer)		16C. Date Signed  11/16/2023

CONTINUATION SHEET AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT	Contract Number		Page of Pages	
	CW101660		2	3
<p>C.2.6.1 The consumer’s stay in the locked facility that is an agent of the Contractor shall not exceed 90 days, and step down to an unlocked residential treatment facility for individuals with traumatic brain injuries shall occur at the end of the 90-day period. The individual consumer shall be returned to the Contractor’s Blacksburg facility where he previously resided following the revision to his medication regimen.</p> <p>C.2.6.2 The Contractor shall provide all transportation for the consumer at no additional cost to the District.</p> <p><b>B.</b> The District will pay the locked facility rate in CLIN 1003 while the consumer resides at the locked facility in Florida. The District will not pay the rate in CLIN 1002 for the Blacksburg facility placement while the consumer resides at the locked facility in Florida.</p> <p><b>C.</b> The following changes have been made to the Price Schedule for partial Option Year One:</p> <ul style="list-style-type: none"> <li>• CLIN 1002 - Cost Reimbursement for Incidentals is re-numbered to CLIN 1004.</li> <li>• The number of consumers in CLIN 1001 is reduced to two.</li> <li>• CLIN 1002 is added for one consumer to reside at the Contractor’s Blacksburg facility for 93 days in Option Year One.</li> <li>• CLIN 1003 - Locked Facility Treatment Program is added for one consumer to reside at the locked facility for 90 days.</li> </ul> <p><b>D.</b> B.7.2 Price Schedule for Option Year One is deleted in its entirety and replaced with Attachment A – Revised Price Schedule for Partial Option Year One.</p>				

**Attachment A - Revised Price Schedule for Partial Option Year One**


**B.7.2 OPTION YEAR ONE - IDIQ**

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
CLIN	Description	Daily Price	Minimum Days	Minimum Price (C*D*=E)	Maximum Days	Maximum Capacity	Not-To-Exceed (NTE) Total Price (C*F*G=H)
1001	Post-Acute Rehabilitation Medical Services (Supported Living) Program Per Person (C.2.4)	\$900	1	\$900	183	2	\$329,400


1002	Post-Acute Rehabilitation Medical Services (Supported Living) Program Per Person	\$900	1	\$900	93	1	\$83,700
1003	Locked Facility Treatment Program (C.2.6)	\$1,500	1	\$1,500	90	1	\$135,000
						NTE Total for B.7.2	\$548,100

**B.7.2.1 OPTION YEAR ONE - COST REIMBURSEMENT**

CLIN	Description	Not-To-Exceed Cost
1004	Cost Reimbursement for Incidentals (Up to \$1,000 per person) (C.2.5)	\$3,000
NTE Total for B.7.2.1		\$3,000
Grand Total for B.7.2		\$551,100

<b>AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>		1. Contract Number CW101660		Page of Pages 1   3	
2. Amendment/Modification Number M0004		3. Effective Date See 16C. below		4. Requisition/Purchase Request No.	
				5. Solicitation Caption Post-Acute Rehabilitation Medical Services	
6. Issued by: Office of Contracting and Procurement (OCP) On behalf of the Department of Behavioral Health 64 New York Avenue, NE, 2nd Floor West Washington, DC 20002			Code 7. Administered by (If other than line 6) Department of Behavioral Health (DBH) 64 New York Ave NE Washington, DC 20002 Phone: (202) 673-2200 Email: dbh@dc.gov		
8. Name and Address of Contractor (No. street, city, county, state and zip code) Mentor ABI, LLC- Neurorestorative 1510 Seneca Dr Blacksburg, VA 24073 Telephone: 617-790-4837 E-Mail: Valerie.Palermo@sevitahhealth.com			9A. Amendment of Solicitation No.		
			9B. Dated (See Item 11)		
			10A. Modification of Contractor/Order No. CW101660		
			10B. Dated (See Item 13) 11/10/2022		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input 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. Offers 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 one (1) copy 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 CONTRACTORS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14					
A. This change order is issued pursuant to (Specify Authority): 27 DCMR, Chapter 36, Contract Modifications The changes set forth in Item 14 are made in the contract/order no. in item 10A.					
X 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 § 3601.3 (a)					
C. This supplemental agreement is entered into pursuant to authority of: 27 DCMR § 3601.2					
D. Other: Exercise of Option, pursuant to the authority of: 27 DCMR § 3601.3 (c)					
<b>E. IMPORTANT:</b> Contractor <input checked="" type="checkbox"/> is not required <input type="checkbox"/> is required to sign this document and return one _____ copy to the issuing office.					
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.)  The purpose of this Contract Modification for the above referenced Contract is to:  A. In accordance with 27 DCMR § 2008 and Section F.3 Option to Extend the Term of the Agreement, the partially exercised Option Year One, is hereby extended through July 31, 2024, with an increase in the not-to-exceed(NTE) amount by \$248,900 from \$551,100 to \$800,000 NTE.					
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 Habibatu Jalloh Deputy Chief Contracting Officer		
15B. Name of Contractor		15C. Date Signed	16B. District of Columbia 		16C. Date Signed 04/05/2024
(Signature of person authorized to sign)		(Signature of Contracting Officer)			

<b>CONTINUATION SHEET AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>	Contract Number	Page of Pages
	CW101660	2 3
<p>B. Revise Section G.8 to read as follows:  Contracts shall be entered into and signed on behalf of the District only by the Contracting Officer.  The contact information of the Contracting Officer is revised to:  Habibatu Jalloh, CPPB  Deputy Chief Contracting Officer  Address: 74 New York Avenue, NE, 2nd Floor  Telephone: 202-771-4082  Email: <a href="mailto:habibatu.jalloh@dc.gov">habibatu.jalloh@dc.gov</a></p> <p>C. In accordance with section 38(d) of the Standard Contract Provisions (Way to Work Amendment Act of 2006), the living wage rate is hereby adjusted to \$17.05 per hour, effective as of January 1, 2024.</p> <p>D. The Living Wage Act Fact Sheet for 2024 is attached and hereby incorporated in the contract as Attachment J.6.</p> <p>E. The Living Wage Act Notice for 2024 is attached and hereby incorporated in the contract as Attachment J.5.</p> <p>F. Attachment J.2, U.S. Department of Labor Wage Determination, is replaced with 2015-4281, Revision 28, dated December 26, 2023.</p> <p>G. B.7.2 Price Schedule for Partial Option Year One is deleted in its entirety and replaced with Attachment A – Revised Price Schedule for Option Year One.</p>		

<b>AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>			1. Contract Number CW101660		Page of Pages 1   3	
2. Amendment/Modification Number M0005		3. Effective Date See date 16C		4. Requisition/Purchase Request No.		5. Solicitation Caption Post-Acute Rehabilitation Medical Services
6. Issued by: Office of Contracting and Procurement (OCP) On behalf of the Department of Behavioral Health 64 New York Avenue, NE, 2nd Floor West Washington, DC 20002			Code	7. Administered by (If other than line 6) Department of Behavioral Health (DBH) 64 New York Ave NE Washington, DC 20002 Phone: (202) 673-2200 Email: dbh@dc.gov		
8. Name and Address of Contractor (No. street, city, county, state and zip code) Mentor ABI, LLC- Neurorestorative 1510 Seneca Dr Blacksburg, VA 24073 Telephone: 617-790-4837 E-Mail: Valerie.Palermo@sevitahhealth.com				9A. Amendment of Solicitation No.		
				9B. Dated (See Item 11)		
				10A. Modification of Contractor/Order No. CW101660		X
				10B. Dated (See Item 13) 11/10/2022		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS						
<input 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. Offers 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 one (1) copy 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 CONTRACTORS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14						
	A. This change order is issued pursuant to (Specify Authority): 27 DCMR, Chapter 36, Contract Modifications The changes set forth in Item 14 are made in the contract/order no. in item 10A.					
X	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 § 3601.3 (a)					
	C. This supplemental agreement is entered into pursuant to authority of: 27 DCMR § 3601.2					
	D. Other: Exercise of Option, pursuant to the authority of: 27 DCMR § 3601.3 (c)					
<b>E. IMPORTANT:</b> Contractor <input type="checkbox"/> is not required <input checked="" type="checkbox"/> is required to sign this document and return one ___(1)___ copy to the issuing office.						
14. Description of Amendment/Modification (Organized by UCF Section headings, including solicitation/contract subject matter where feasible.)						
The purpose of this Contract Modification for the above referenced Contract is to:						
A. In accordance with 27 DCMR § 2008 and Section F.3 Option to Extend the Term of the Agreement, Option Year One is hereby fully exercised for the period of performance from November 10, 2023 through November 9, 2024, with a not-to-exceed amount \$1,048,200.						
B. B.7.2 Price Schedule for Partial Option Year One is deleted in its entirety and replaced with Attachment A – Revised Price Schedule for Option Year One.						
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) Jane Imboden Vice President of Operations				16A. Name of Contracting Officer Habibatu Jalloh Deputy Chief Contracting Officer		
15B. Name of Contractor   (Signature of person authorized to sign)		15C. Date Signed 04/10/2024	16B. District of Columbia		16C. Date Signed	
						(Signature of Contracting Officer)



<b>CONTINUATION SHEET AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>	Contract Number	Page of Pages	
	CW101660	2	3

C. Continuation of services for the FY2025 period of performance November 10, 2023 through September 30, 2024 is pending availability of funds which will be reflected in a District issued purchase order. Funding beyond September 30, 2024 is contingent on the availability of funds for FY2025.

**Attachment A - Revised Price Schedule for Option Year One**

**B.7.2 OPTION YEAR ONE - IDIQ**

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
CLIN	Description	Daily Price	Minimum Days	Minimum Price (C*D*=E)	Maximum Days	Maximum Capacity	Not-To-Exceed (NTE) Total Price (C*F*G=H)
1001	Post-Acute Rehabilitation Medical Services (Supported Living) Program Per Person (C.2.4)	\$900	1	\$900	366	2	\$658,800
1002	Post-Acute Rehabilitation Medical Services (Supported Living) Program Per Person	\$900	1	\$900	276	1	\$248,400
1003	Locked Facility Treatment Program (C.2.6)	\$1,500	1	\$1,500	90	1	\$135,000
						NTE Total for B.7.2	\$1,042,200

<b>CONTINUATION SHEET AMENDMENT OF SOLICITATION / MODIFICATION OF CONTRACT</b>	Contract Number		Page of Pages	
	CW101660		3	3

**B.7.2.1 OPTION YEAR ONE - COST REIMBURSEMENT**

<b>CLIN</b>	<b>Description</b>	<b>Not-To-Exceed Cost</b>
1004	Cost Reimbursement for Incidentals (Up to \$2,000 per person) (C.2.5)	\$6,000
NTE Total for B.7.2.1		\$6,000
Grand Total for B.7.2		\$1,048,200