



STATE OF TENNESSEE  
DEPARTMENT OF MENTAL HEALTH SUBSTANCE ABUSE SERVICES MIDDLE  
TENNESSEE MENTAL HEALTH INSTITUTE

**REQUEST FOR PROPOSALS # 33911-20001  
AMENDMENT # 3  
FOR COMPREHENSIVE COOK-SERVE FOOD  
SERVICES**

**DATE: February 5, 2025**

**RFP # 33911-20001 IS AMENDED AS FOLLOWS:**

- 1. This RFP Schedule of Events updates and confirms scheduled RFP dates. Any event, time, or date containing revised or new text is highlighted.**

EVENT	TIME (central time zone)	DATE	UPDATED OR CONFIRMED
1. RFP Issued		November 7, 2024	CONFIRMED
2. Disability Accommodation Request Deadline	2:00 p.m.	November 13, 2024	CONFIRMED
3. Pre-response Conference	9:30 a.m.	November 19, 2024	CONFIRMED
4. Notice of Intent to Respond Deadline	2:00 p.m.	November 20 ,2024	CONFIRMED
5. Written "Questions & Comments" Deadline	2:00 p.m.	November 27, 2024	CONFIRMED
6. State Response to Written "Questions & Comments"		December 12, 2024	CONFIRMED
7. Response Deadline	2:00 p.m.	January 8, 2025	CONFIRMED
8. State Completion of Technical Response Evaluations (Sections B. and C., RFP Attachment 6.2)		January 21, 2025	CONFIRMED
9. State Schedules Respondent Oral Presentation		January 22, 2025	CONFIRMED
10. Respondent Oral Presentation	9 a.m. – 12 p.m. or 1 p.m. – 4 p.m.	January 29-30, 2025	CONFIRMED

11. State Completion of Technical Response Evaluations (Section D., RFP Attachment 6.2.)	4:00 p.m.	January 31, 2025	CONFIRMED
12. State Opening & Scoring of Cost Proposals	2:00 p.m.	February 7, 2025	UPDATED
13. Negotiations	4:00 p.m.	February 10 - February 18, 2025	UPDATED
14. State Notice of Intent to Award Released <u>and</u> RFP Files Opened for Public Inspection	2:00 p.m.	February 19, 2025	UPDATED
15. End of Protest Period		February 26, 2025	UPDATED
16. State sends contract to Contractor for signature		February 27, 2025	UPDATED
17. Contractor Signature Deadline	2:00 p.m.	March 5, 2025	UPDATED
18. Performance Bond Deadline	4:30 p.m.	March 12, 2025	UPDATED

2. Delete RFP ATTACHMENT 6.3. in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

**RFP ATTACHMENT 6.3.**

**COST PROPOSAL & SCORING GUIDE**

**NOTICE: THIS COST PROPOSAL MUST BE COMPLETED EXACTLY AS REQUIRED**

**COST PROPOSAL SCHEDULE—** The Cost Proposal, detailed below, shall indicate the proposed price for providing goods or services as defined in the Scope of Services of the RFP Attachment 6.6., Pro Forma Contract, for the entire contract period. The Cost Proposal shall remain valid for at least 120 days subsequent to the date of the Cost Proposal opening and thereafter in accordance with any contract resulting from this RFP. All monetary amounts shall be in U.S. currency and limited to two (2) places to the right of the decimal point.

**NOTICE:** The Evaluation Factor associated with each compensable unit is for evaluation purposes only. The evaluation factors do NOT and should NOT be construed as any type of volume guarantee or minimum purchase quantity. The evaluation factors shall NOT create rights, interests, or claims of entitlement in the Respondent.

Notwithstanding the cost items herein, pursuant to the second paragraph of the *Pro Forma* Contract, Section C.1. (refer to RFP Attachment 6.6.), the State is under no obligation to request any goods or services from the Contractor in any specific dollar amounts or to request any goods or services at all from the Contractor during any period of this Contract.

This Cost Proposal must be signed, in the space below, by an individual empowered to bind the Respondent to the provisions of this RFP and any contract awarded pursuant to this RFP. If the individual signing this Cost Proposal is not the *President* or *Chief Executive Officer*, the Respondent must attach evidence to the Cost Proposal showing the individual's authority to legally bind the Respondent.

<b>RESPONDENT SIGNATURE:</b>	
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<b>PRINTED NAME &amp; TITLE:</b>								
<b>DATE:</b>								
<b>RESPONDENT LEGAL ENTITY NAME:</b>								
Cost Item Description	Proposed Cost					State Use ONLY		
	Year 1 07/01/2025 - 06/30/2026	Year 2 07/01/2026 - 06/30/2027	Year 3 07/01/2027 - 06/30/2028	Year 4 07/01/2028 - 06/30/2029	Year 5 07/01/2029 - 06/30/2030	Sum	Evaluation Factor	Evaluation Cost (sum x factor)
Daily Service Recipient Meals and Snacks	\$_____/per service recipient per day	\$_____/per service recipient per day	\$_____/per service recipient per day	\$_____/per service recipient per day	\$_____/per service recipient per day		69,350	
Employee Meal (including beverage) purchased by employees using cash or credit/debit card at register	\$_____/per meal	\$_____/per meal	\$_____/per meal	\$_____/per meal	\$_____/per meal		0	
Emergency Employee Meals (sandwich, chips, fruit, and beverage) billed to the State	\$_____/per meal	\$_____/per meal	\$_____/per meal	\$_____/per meal	\$_____/per meal		4,940	
Employee Grill Meal: (Grill entrée, side, beverage purchased by Employees using cash or credit/debit card at register)	\$_____/per meal	\$_____/per meal	\$_____/per meal	\$_____/per meal	\$_____/per meal		0	
Employee Grill Entrée: Grilled Cheese Sandwich (purchased by Employees using cash or credit/debit card at register)	\$_____/per entree	\$_____/per entree	\$_____/per entree	\$_____/per entree	\$_____/per entree		0	
Employee Grill Entrée: Hamburger (purchased by Employees using cash or credit/debit card at register)	\$_____/per entree	\$_____/per entree	\$_____/per entree	\$_____/per entree	\$_____/per entree		0	

Employee Grill Entrée: Cheeseburger purchased by Employees using cash or credit/debit card at register	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree		0	
Employee Grill Entrée: Veggie Burger (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree		0	
Employee Grill Entrée: Veggie Burger w/ Cheese (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree		0	
Employee Grill Entrée: Chicken Tenders (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree	\$_____/_____ per entree		0	
Employee Grill Side Item: French Fries (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item		0	
Employee Grill Side Item: Grilled Hot Line Veggies (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item		0	
Employee Grill Side Item: Salad (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item		0	
Employee Grill Side Item: Fruit (purchased by Employees using cash or credit/debit card at register)	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item	\$_____/_____ per side item		0	
Catered Hot Meals (entrée, starch, vegetable, roll, and beverage)	\$_____/_____ per meal	\$_____/_____ per meal	\$_____/_____ per meal	\$_____/_____ per meal	\$_____/_____ per meal		250	
Catered Cupcakes	\$_____/_____ each	\$_____/_____ each	\$_____/_____ each	\$_____/_____ each	\$_____/_____ each		100	

Catered Hot Coffee, Tea, and Punch (includes cream, sugar, stir sticks, etc.)	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving		100	
Catered Bottled Water	\$_____/per bottle	\$_____/per bottle	\$_____/per bottle	\$_____/per bottle	\$_____/per bottle		250	
Catered Mixed Nuts	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving		48	
Catered Mints	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving		48	
Catered Danish or Muffin Tray	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving		48	
Catered Fruit or Vegetable Tray	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving	\$_____/per serving		48	
Catered Birthday or Special Occasion Half-Sheet Cake	\$_____/per half sheet cake	\$_____/per half sheet cake	\$_____/per half sheet cake	\$_____/per half sheet cake	\$_____/per half sheet cake		12	
Catered Birthday or Special Occasion Angel Food Cake	\$_____/each	\$_____/each	\$_____/each	\$_____/each	\$_____/each		12	
<b>TOTAL EVALUATION COST AMOUNT</b> (sum of evaluation costs above): The Solicitation Coordinator will use this sum and the formula below to calculate the Cost Proposal Score. Numbers rounded to two (2) places to the right of the decimal point will be standard for calculations.								
$\frac{\text{lowest evaluation cost amount from all proposals}}{\text{evaluation cost amount being evaluated}} \times 40$						(maximum possible score)	=	
State Use – Solicitation Coordinator Signature, Printed Name & Date:								

3. **RFP Amendment Effective Date.** The revisions set forth herein shall be effective upon release. All other terms and conditions of this RFP not expressly amended herein shall remain in full force and effect.