



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH

ADDENDUM #1 TO THE

REVIEW OF QUALIFICATIONS

FOR

90-25-131 ROQ

**Construction Manager at Risk (CMAR)- Valleywise Community
Health Center-Guadalupe Refresh Project**

POSTED DECEMBER 13, 2024

COVER SHEET

BY SIGNING AND RETURNING THIS COVER SHEET, I CERTIFY RECEIPT OF ADDENDUM ONE (1) TO THE CONSTRUCTION MANAGER AT RISK (CMAR)-VALLEYWISE COMMUNITY HEALTH CENTER-GUADALUPE REFRESH PROJECT-ROQ

Printed Name of Authorized Individual

Name of Submitting Organization

Signature of Authorized Individual

Date

THE SIGNATURE PAGE OF THIS ADDENDUM ONE (1) SHOULD BE SIGNED AND RETURNED WITH YOUR STATEMENT OF QUALIFICATIONS.

CONTRACTS MANAGEMENT DEPARTMENT
2619 E PIERCE STREET, PHOENIX, AZ 85008-6092

CONSTRUCTION MANAGER AT RISK (CMAR)- VALLEYWISE COMMUNITY HEALTH CENTER-GUADALUPE
 REFRESH PROJECT-ROQ
90-25-131-ROQ
ADDENDUM #1

The Maricopa County Special Health Care District (“District”) d.b.a. Valleywise Health is hereby issuing Addendum One (1) to the Review of Qualifications which requested statements of qualifications from qualified construction manager or general contractor to serve as the Construction Manager at Risk (CMAR) for the Valleywise Community Health Center – Guadalupe Refresh Project..

Pursuant to the Procurement Code Clause HS-305, Addenda to Solicitations, Paragraph A (1, 2), this Addendum One (1) will make changes to the Solicitation and correct defects and ambiguities.

1.	<p>Question. In Question 3 under "Experience on Similar Projects," it asks: "List all projects where the Respondent/team provided CMAR or agency construction management in the last five years, including both completed and ongoing projects." Given the size of our company, and number of projects completed and ongoing, would it be acceptable to attach this list as an exhibit to ensure we answer the question fully while staying within the page limit?</p>
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Answer. Please provide the information as requested

2.	<p>Question. Per 2.1, the contract documents are also supposed to include:</p> <ul style="list-style-type: none"> • General Conditions & General Conditions Appendices • Exhibit A-2 Accepted GMP/Price Proposal • Exhibit E – Life Safety and infection control package • Exhibit F – Final GMP • Exhibit G – Labor Reporting.
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Answer. Documents are available on the website: [Open Solicitations | Valleywise Health](#)

3.	<p>Question. We are reviewing the requirements for the Valleywise Community Health Center-Guadalupe-Refresh Project, and we would appreciate some clarification regarding the Insurability question, section 6.3.e. Could you please confirm if you are looking for a Certificate of Insurance as evidence of coverage, or if you require something else to satisfy this requirement?</p>
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Answer. Provide a statement of insurability from a company or companies lawfully authorized to transact insurance business in the State of Arizona and rated at least B++ in the company’s current A.M. Best Company rating. The selected CMAR will be required to furnish a certificate(s) of insurance meeting Valleywise Health’ insurance requirements.

4.	<p>Question. In 5.04 B it asks that we submit a statement regarding our bonding capacity “issued by the Director of the State of Arizona Department of Insurance.” Then later under the “Evaluation Criteria – Financial Stability” 6.2 B it asks for a statement describing the company’s bonding capacity. My question/comment to you is I’ve never seen a request for our bonding capacity to come from the Director of the State of Arizona Department of Insurance. The letter typically comes from our surety or our surety broker. Can you please confirm it is acceptable that the requested information is provided by our surety.</p>
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Answer. **5.04 (B) shall now read:** A statement regarding the Respondent’s bonding capacity issued by the respondent’s bonding company.

END OF ADDENDUM #1