

<b>AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT</b>		1. CONTRACT ID CODE		PAGE OF PAGES <b>1 of 5</b>	
2. AMENDMENT/MODIFICATION NO. <b>Amendment No. A002</b>		3. EFFECTIVE DATE <b>11 May 2010</b>		4. REQUISITION/PURCHASE REQ. NO.	
5. PROJECT NO. (If applicable)		6. ISSUED BY  <b>GENERAL SERVICES OFFICE American Embassy 27 Napier Road Singapore 258508</b>		7. ADMINISTERED BY (If other than Item 6)	
8. NAME AND ADDRESS OF CONTRACTOR (NO., street, city, county, State, and ZIP Code)		<b>X</b>	9a. AMENDMENT OF SOLICITATION NO. <b>SSN10010R0531</b>		
			9b. DATED (SEE ITEM 11) <b>16 March 2010</b>		
			10a. MODIFICATION OF CONTRACT/ORDER NO.		
			10b. DATED (SEE ITEM 13)		
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS - [ X ] The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers [ ] is extended, [ X ] 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 copy of the amendment;(b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. 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 change may be made by telegram or letter, provided each telegram or letter 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 CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) 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 date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:					
D. OTHER (Specify type of modification and authority)					
E. IMPORTANT: Contractor [ ] is not, [ X ] is required to sign this document and return this 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 Amendment No. A002 to RFP No. SSN10010R0531 is to (1) make changes to the solicitation (2) correct inconsistency in Price tables under B.6.1 to B.6.5. Changes are highlighted on pages 2.  The due date and time remains as <b>May 21, 2010 at 4.30 pm Singapore time.</b>  Offerors are also requested to acknowledge Amendments No. A001 and A002 on Block 14 of SF33 when submitting their proposals.  Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME OF CONTRACTING OFFICER  <b>Charles W. Davis</b>		
15B. NAME OF CONTRACTOR/OFFEROR  BY _____ (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA (signed) BY _____ (Signature of Contracting Officer)	
				16C. DATE SIGNED	

AMENDMENT NO. A002

(1) The Government requires that physical therapy and ambulance fees (associated with hospitalization) be included in the coverage. Hence, paragraphs C.1.1.1. and C.1.2. in the original RFP are superceded by the following modified paragraphs. Changes are in yellow highlight. Offerors are asked to replace these paragraphs.

C.1.1.1. Hospitalization (In-Patient Expenses)

Reimbursement of room and board; hospital medical expenses including laboratory tests, x-rays, and other diagnostic tests; nursing care; operating room costs; intensive care unit costs; prescription medicines; physical therapy **within 90 days of related hospitalization, and ambulance fees when associated with hospitalization.**

C.1.2.1. There is no reimbursement for expenses related to miscarriage or abortion; family planning; immunizations; ambulance service or transportation **when not associated with inpatient hospitalization**; out-patient physical therapy; psychiatric treatment; hearing aids; dental care for dependents; and optical care including eyeglasses.

(2) Offerors are asked to replace pages 10-12 of the solicitation with attached corresponding pages. Please use revised attached pages for submission purposes.

Offerors are also requested to acknowledge Amendments No. A001 and A002 on Block 14 of SF33 when submitting their proposals.

## PART II PRICE - GROUP LIFE INSURANCE

### B.5. GROUP LIFE INSURANCE SERVICES

The Contractor shall provide the Group Life Insurance services described herein to employees of the Government of the United States of America in Singapore. The groups of employees who shall be provided this insurance are listed in C.2.3. This insurance shall be provided in accordance with Section C and the Exhibits in Section J.

B.5.1. Official Residence Expense (ORE) Staff is included under this contract only as a rider; the Contractor shall bill the Chief of Mission and Deputy Chief of Mission (for ORE Staff) separately, at the rates specified below. See Section G for billing procedures.

### B.6.1. BASE YEAR OF CONTRACT

This is a fixed-price with economic price-adjustment requirements type contract under which the Government will issue firm-fixed price task orders. The fixed prices/premium rates in Singapore Dollars per one thousand of salary to provide life insurance, accidental death and dismemberment and partial and total disability coverage are as follows:

Quarterly Rate for covered employees (total is 110 full time):

Type of Insurance	Annual Sum Assured (S\$)	Premium rate (per \$1,000) per quarter	GST 7%	Premium per quarter
Basic Life Coverage: 28 months benefit	5,756,634			
30 months benefit	9,940,890			
Accidental Death and Dismemberment, Partial and Total Disability Coverage 24 months benefit	12,886,970			
<b>Total for 12 months</b>	<b>28,584,494</b>			
<b>Total per quarter</b>	<b>7,146,123.50</b>			

Total Price for Base Year: S\$ \_\_\_\_\_ x 4 = S\$ \_\_\_\_\_ (includes GST)

**B.6.2. FIRST OPTION YEAR OF CONTRACT:**

Quarterly Rate for covered 110 employees:

Type of Insurance	Annual Sum Assured (\$\$)	Premium rate (per \$1,000) per quarter	GST 7%	Premium per quarter
Basic Life Coverage: 28 months benefit	5,756,634			
30 months benefit	9,940,890			
Accidental Death and Dismemberment, Partial and Total Disability Coverage 24 months benefit	12,886,970			
<b>Total for 12 months</b>	<b>28,584,494</b>			
<b>Total per quarter</b>	<b>7,146,123.50</b>			

Total Price for Option Year 1: \_\_\_\_\_ x 4 = \_\_\_\_\_ (includes GST)

**B.6.3. SECOND OPTION YEAR OF CONTRACT:**

Quarterly Rate for covered 110 employees:

Type of Insurance	Annual Sum Assured (\$\$)	Premium rate (per \$1,000) per quarter	GST 7%	Premium per quarter
Basic Life Coverage: 28 months benefit	5,756,634			
30 months benefit	9,940,890			
Accidental Death and Dismemberment, Partial and Total Disability Coverage 24 months benefit	12,886,970			
<b>Total for 12 months</b>	<b>28,584,494</b>			
<b>Total per quarter</b>	<b>7,146,123.50</b>			

Total Price for Option Year 2: \_\_\_\_\_ x 4 = \_\_\_\_\_ (includes GST)

**B.6.4. THIRD OPTION YEAR OF CONTRACT:**

Quarterly Rate for covered 110 employees:

Type of Insurance	Annual Sum Assured (S\$)	Premium rate (per \$1,000) per quarter	GST 7%	Premium per quarter
Basic Life Coverage: 28 months benefit	5,756,634			
30 months benefit	9,940,890			
Accidental Death and Dismemberment, Partial and Total Disability Coverage 24 months benefit	12,886,970			
<b>Total for 12 months</b>	<b>28,584,494</b>			
<b>Total per quarter</b>	<b>7,146,123.50</b>			

Total Price for Option Year 3: \_\_\_\_\_ x 4 = \_\_\_\_\_ (includes GST)

**B.6.5. FOURTH OPTION YEAR OF CONTRACT:**

Quarterly Rate for covered 110 employees:

Type of Insurance	Annual Sum Assured (S\$)	Premium rate (per \$1,000) per quarter	GST 7%	Premium per quarter
Basic Life Coverage: 28 months benefit	5,756,634			
30 months benefit	9,940,890			
Accidental Death and Dismemberment, Partial and Total Disability Coverage 24 months benefit	12,886,970			
<b>Total for 12 months</b>	<b>28,584,494</b>			
<b>Total per quarter</b>	<b>7,146,123.50</b>			

Total Price for Option Year 4: \_\_\_\_\_ x 4 = \_\_\_\_\_ (includes GST)

**B.6.6. GRAND TOTAL PRICE FOR ALL YEARS inclusive of GST:**

Base Year            S\$ \_\_\_\_\_  
Option Year 1        S\$ \_\_\_\_\_  
Option Year 2        S\$ \_\_\_\_\_  
Option Year 3        S\$ \_\_\_\_\_  
Option Year 4        S\$ \_\_\_\_\_  
TOTAL                S\$ \_\_\_\_\_