

3/24/2014

TO: ALL POTENTIAL BIDDERS

FROM: H. Ryan Bolles
DSCYF – Contract Administrator

SUBJECT: ADDENDUM TO REQUEST FOR PROPOSALS (RFP) – CYF14-01 Residential Treatment Services

RFP CYF14-01 Questions/Answers
ADDENDUM #1

The following is a list of questions and answers prepared for potential bidders:

1. On page 12 number 3 the RFP asks bidders to provide, “Experience and/or knowledge of managed care procedures and requirements.” Provide more details regarding the information you are seeking.

The Department’s Division of Prevention and Behavioral Health Services serves as the State Managed Care Organization for children who have exhausted benefits or require more intensive services. The RFP ask bidder to provide experience working with other managed care organizations (e.g. state Medicaid, Delaware Physician’s Care, and United Health).

2. On page 13 number 9 the RFP states “List one or more purchasing organizations served by the proposing agency, include contact name and phone number and type of service(s) contracted” can you please clarify what is being asked?

The RFP is asking for bidder’s to provide a list of past and/or current agency and/or organizations that have purchased services from the bidder. The term “purchasing organization” refers to any agency/organization that has purchased service from you, the bidder. The “Type of Service(s)” refers to the specific service(s) the bidder supplied to the purchasing organization.

Example:

Agency/Organization	Contact Name	Contact Phone	Type of Service(s)
DPBHS	Reid Millius	302-633-2597	Outpatient Mental Health;
DDHSS	Jane Smith	302-555-5555	Professional Development

3. On page 13 number 11 the RFP states, “Current DSCYF contracted providers must include previous DSCYF monitoring reports and Quality Improvement Plans” please clarify.

If a bidder was previously contracted or is currently contracted with any of the Department’s Divisions, the bidder must submit all monitoring reports and/or Quality Improvement Plans, regardless of the Department’s purchasing Division.

4. On page 13 number 12 the RFP states, “If you are a provider that does not currently contract with DSCYF but does contract with a division or department of government in a different state, previous monitoring reports and Quality Improvement Plans must be submitted.” Please provide more specification.

If a bidder was previously contracted or is currently contracted with any other Delaware or other State government Department and/or Division, bidders are asked to submit all monitoring reports and/or Quality Improvement Plans.

5. Is there a radius requirement for location of program?

No, a specific radius requirement was not given. Please reference page 7 of the RFP, “DPBHS is not specifying required locations; however, it is expected that the proposed residential treatment services will be available to serve clients in their local community or within a close proximity.”

6. On page 13, #8 (at the top), the RFP says: “Describe all accreditation history, including a copy of the last accreditation survey report and self-study report if the accreditation report was completed over 18 months prior to this proposal’s date.” This is repeated on page 15 under the Proposal Review section. Can you clarify the minimum documentation required?

Please submit your most recent maintenance report and the certificate of accreditation.

Financial Related Questions:

1. Is DPBHS providing start-up funding?

DPBHS is willing to consider and discuss any and all appropriate expenditures proposed by the bidders.

2. Does DPBHS require or have electronic billing capabilities?

DPBHS current system does not support electronic billing capabilities.

3. Has DPBHS identified a specific range of per diems rates to be considered and can DPBHS provide a range of rates for residential services purchased?

No. DPBHS has not identified a specific range of per diem rates. During the past 3 years we have paid \$360 - \$575 per day with an average of \$458. Additional specialized services may have been charged at a different rate or added on to the basic rates.

4. Will public schools or the Department of Education provide funding for education services?

Bidders are encouraged to seek partnership within the children’s communities and schools; however, DPBHS does not have an agreement with Delaware Department of Education for education services.

5. Will education services be bundled in with day treatment and residential services?

The RFP is requesting Residential Treatment Services only. Day treatment services are not specifically addressed in this RFP. However, the bidder should address how it plans to meet the educational needs of the youth in care.

6. If bidders are to include Day Treatment as part of this RFP process, budget-wise should there be a separate budget for Day Treatment and the Residential sites? Also, if so, I know there were

specific rates proposed for Day Treatment when that RFP was released, are those going rates, or are we expected to include that with the proposed residential rate?

Day Treatment is not a part of the services defined in the continuum of residential treatment services and thus not requested as part of this RFP. However, the current unit cost for day treatment is \$223.80

7. What are examples of creative reimbursement approaches?

Bids might include different approaches such as: a range of per diem prices varying with intensity of services delivered to a client; a base rate with add-ons for treatment elements required by a client; or any other creative proposal.

Residential Treatment Program Model and Service Questions:

1. The RFP did not speak to educational services, is DPBHS requiring programs to include educational services?

The RFP did not specifically require educational services; however the bidders shall anticipate meeting the educational needs of the children.

2. Are proposal expected to provide general residential treatments or specialized residential treatment, or a combination?

Proposals are expected to reflect the organization/agency's ability to meet the needs of client's served by DPBHS, specifically those in the target population as described on page 9 of the RFP. On page 14 number 9 asks that responses identify "any proposed exclusion criteria for admission or participation of the targeted population(s) and the criteria used for to justify the exclusion".

3. Are multiple proposals from one organization or joint proposals being considered?

Yes.

4. Is there any prohibition in the amount of partnering?

No.

5. Is the RFP just for residential services or are is PBH seeking community-based services?

The RFP is seeking residential treatment services.

6. Is DPBHS expecting proposals to be for niche programs?

DPBHS is interested in proposals to meet the needs of the targeted population; however, DPBHS is not expecting proposals to be niche programs only.

7. Does the RFP include transitional services?

The ultimate goal of treatment is for youth to return home with their families and manage their mental health and/or substance abuse needs by utilizing the least restrictive, services that appropriately and adequately address the youth's individual treatment needs and safety. It is strongly suggested that responses to this RFP identify planning strategies to aid in reintegrating youth into their homes and support families as the child returns to the home.

8. Is preference given for community-based residential or campus-based residential settings?

No

9. Is the cap on number of beds?

No. However, all potential Contractors shall meet all residential treatment facilities regulations. Bidders can access the regulations online at: http://kids.delaware.gov/pdfs/occl_reqs_rccdf.pdf

10. Is DPBHS seeking programs with a certain length of stay?

DPBHS did not specify a length of stay. DPBHS is interested in programs using evidence-based best practices with goals to meet the individual needs of children and support their transitions into the home and community with the expectation that length of stay (LOS) will be addressed and according to best practices.

11. Are current in-state contracted services meeting the needs of the state such as services appropriate for children's needs and utilization?

DPBHS developed the RFP as a mechanism to redesign and expand its current residential treatment services. Current in-state contracted services are able to meet the needs of some of the children served but not all. The RFP is an invitation for all potential Contractors to offer new, innovative, and creative approaches to residential treatment and current in-state contractors are encouraged to submit proposals.

12. For substance abuse treatment, are agencies expected to provide detox or may they propose providing post-detox treatment? Where does detox currently take place?

Programs are not expected to provide detox services and may propose providing post-detox services. DPBHS does not have a specific location for detox services but they take place at inpatient hospitals. Overall, detox services are adapted to meet the child's situation.

***Please note the following questions were asked by current in-state Contractors**

13. Does DPBHS expect programs to include day treatment services or are responses to the RFP expected to be strictly for Residential Services? Or is the Facility-based RTC that includes Day Treatment still an optional model to be proposed?

This RFP is for residential services only. DPBHS is not specifying services such as day treatment as requirements for proposals. DPBHS is open to considering a variety of approaches proposed by Residential Treatment Centers.

14. If the Day Treatment program will not be included in the RFP (as it is currently set up per our model), is there an expectation that Residential Services provide school for the residential youth as we currently operate?

There is no expectation for Residential services to include education as your specific program operates, however DPBHS is open to considering a variety of approaches to meeting all the needs of children; therefore if proposed by the bidder education services will be considered in the review.

15. Is the current in-state structure for teachers going to be the same?

Bidders proposing to provide educational services should reflect those costs in their proposal and/or describe any collaborative efforts associated with the services. DPBHS is open to creative, innovative and non-traditional approaches to meeting these educational needs.

Data Questions

1. Can DPBHS provide ages of children served in out of state programs?

Bidders can refer to the Residential Service Data Appendix included in the RFP.

2. Can DPBHS provide data for co-occurring diagnoses?

Bidders can refer to the Residential Service Data Appendix included in the RFP. The RFP also provides a written summary of the children’s diagnoses on page 9.

3. Can DPBHS provide monthly census averages for children served and units of service delivered? What is the typical length of stay for youth in substance abuse facilities?

Bidders can refer to the Residential Service Data Appendix included in the RFP. Additional information is provided below.

Fiscal Year 2013 – Service Data			
Type of Service	Average Clients served per Month	Average Units Consumed per month	Average Length of stay
Residential Treatment, Mental Health	71.75	1936.2	205.35
Residential Treatment, Substance Abuse	12	215.2	54.46

4. What is the breakdown for the number of girls placed in residential substance abuse centers for a given year?

Bidders can refer to the Residential Service Data Appendix included in the RFP.

5. On page 14, under the Program Description item 11, it asks, “Provide a narrative description of client service scenarios for the service(s) being proposed.” Can you give us an example of what is being requested here?

DSCYF is requesting bidders provide examples of how a client would be serviced by the treatment options and modalities outlined in your proposal. Provide a scenario of what the client’s service continuum would look like from intake to discharge, including aftercare planning.

6. What is the cognitive functioning of the youths served?

DSCYF serves children with various levels of cognitive functioning; of which only a small number of the children have low cognitive functioning levels.

All other terms and conditions remain the same.

If you have any questions, please contact H. Ryan Bolles at herbert.bolles@state.de.us or 302-633-2701