



*Delaware Health  
And Social Services*

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**DIVISION OF MANAGEMENT SERVICES**

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PROCUREMENT

DATE: April 16, 2012

HSS 12 021

SMART START/HEALTHY FAMILIES AMERICA

FOR

DIVISION OF PUBLIC HEALTH

Date Due: May 9, 2012  
11:00AM

ADDENDUM # 1

Please Note:

THE ATTACHED SHEETS HEREBY BECOME A PART OF THE ABOVE  
MENTIONED BID.

Responses to questions addressed at the pre-bid meeting on  
April 16, 2012 are attached.

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# **RFP HSS 12021 SMART START/HEALTHY FAMILIES AMERICA**

## **Pre-bid Meeting Questions**

**April 16, 2012**

- 1) Can you waive the BSN requirement for staff if they have experience / training?

Answer: In addition to the existing staff criteria outlined in the RFP, the Division will also consider proposals that include a multi-disciplinary team, which may include hiring Registered Nurses. Staff structure must still include 3 teams of 5 individuals each, and each team is still required to have a Nurse Supervisor.

- 2) Can we phase in contract due to hiring/ start up? How would that work?

Answer: The Division will consider proposals that include a detailed workplan that describes the Start up Phase with a timeline and approach to recruiting and hiring staff.

- 3) Records- how will we get access to records since we do not house contract?

Answer: The Delaware Division of Public Health is implementing a web-based Electronic Medical Record (EMR) system with a specific module for tracking and monitoring data for the home visiting program. We are using an off-the shelf system that has been customized to meet our needs. The vendor is CORE Solutions and the system is Cx360. We anticipate giving our home visiting partners' secured web-based access (real time data entry) to the system to enter data on clients served to meet and report on 6 federal Benchmarks. DPH will also develop a data sharing agreement as part of the negotiated contract with the selected vendor.

- 4) Consents- can we see and can our legal modify?

Answer: Please see attached Smart Start Healthy Families America (HFA) Informed Consent form and the Rights and Confidentiality form for your review.

5) HFA tool- screening criteria?

Answer: Please see attached screen shot of the Smart Start HFA Screening tool captured in the EMR system for your review. The attached screening tool will be captured in the data system, which selected vendors may have access to, from a secured online portal. DPH is currently exploring this access with the technology vendor, Core Solutions.

6) How will this program work w/ Medicaid Managed Care companies?

Answer: DPH Smart Start currently has a relationship with Medicaid Managed Care Organizations (MCO) for reimbursement and referrals for home visiting clients, and we look forward to continuing our work together as we explore ways to sustain the home visiting program.

To meet our ultimate goal of a self-sustainable program, we will continue to explore federal funding and other sources, including Medicaid. We intend to expand our efforts to develop partnerships between home visiting programs and managed health care systems, Medicaid and other health insurance programs. There are long-term benefits to meeting the needs of new mothers and their infants (prenatally through age 2-3) at a relatively low cost of home visitor services.

7) How do you sustain a program such as this? (i.e. it is a 2 year grant)

Answer: On March 23, 2010, the Patient Protection and Affordable Care Act became law. Included in this new law is a provision for the creation of a Maternal, Infant, and Early Childhood Home Visiting Program. Under the Maternal, Infant, and Early Childhood Home Visiting Program, Delaware was awarded funds in FY10 and FY11, and was recently awarded a competitive grant to deliver effective evidence-based early childhood home visiting programs in communities identified as being at risk. The purpose of this program is to fund States to provide evidence-based home visitation services to improve outcomes for children and families who reside in at risk communities.

Funds are available for the selected vendor to provide services in the area of **Smart Start/ Healthy Families America**. Contract term is **two (2)** years with the possibility of renewal for up to **three (3)** additional years contingent on funding availability and task performance.

Also see answer to Question #6 above.

8) Regarding the EMR, will DPH extract and do data collection for extracts?

Answer: APS Health Care, Inc. (DPH Evaluation, Research and Epidemiology vendor) will develop data collection, tracking and reporting system, and an evaluation plan working in collaboration with DPH. Please also see answer to Question #3.

9) Will reporting be only accounting since other reports are web based and the EMR.

Answer: DPH will develop a data sharing and reporting agreement as part of the negotiated contract with the selected vendor. Please also see answer to Questions #3 and #8.

10) Since this a statewide program, can we bid on only parts of the service locations?

Answer: The Division of Public Health (DPH) seeks Smart Start nurses for the identified high risk community zones as described in the Updated DE-MIECHV State Plan. It is expected that the vendor submit a bid and proposal to serve all six high risk zones or specific high risk zones.

11) Clinician software- will DPH provide that for the staff?

Answer: Please see answer to Question #3, 8, and 9.

12) If nurses had AirCards, could they access the data system from the client's home?

Answer: Yes

13) If awarded, what would be the official startup date of the contract?

Answer: The anticipated award notification date is May 11<sup>th</sup>. We anticipate that if contract negotiations are completed in a timely manner, contracts may begin approximately June 15<sup>th</sup>. DPH reserves the right to alter these tentative dates due to unforeseen circumstances.

14) How would we get referrals?

Answer: DPH is building capacity for social marketing DPH Smart Start. In addition, DPH is also developing a mechanism to provide Technical Assistance to home visitors. A series of networking opportunities will be offered to several evidence-based home visiting programs, where generating referrals may be a discussion topic.

There are several sources for generating referrals and they may include (but, are not limited to):

- Internal and external partners (i.e. Home Visiting Community Advisory Board)
- Medicaid Managed Care Organizations
- Hospitals
- Federally Qualified Health Centers (FQHCs)
- 2-1-1/United Way Help Me Grow
- Physicians (OBGYNs, etc.)
- DPH Smart Start (i.e. in the event that caseloads reach maximum capacity)