

- 1) What are the correct dates for the term of the contract? Section 1.6 states the beginning as 12/1/18 and the end of the contract to be 6/30/2018.
 - a) RFP has been updated. Expected contract execution date is on or about 2/15/2019.
 - b) End date of the contract has been updated in the RFP to reflect 6/30/2019.
- 2) What are the minimum and maximum lengths of the contract?
 - a) The maximum length of the contract for FY 19 is five (5) months. NEDHSA reserves the right to renew the contract for an additional twelve (12) months beginning 7/1/2019.
- 3) Does the district plan to re-issue the RFP at the end of the contract?
 - a) No, there is no plan to re-issue an RFP at the end of the contract.
- 4) Is Outcome 7 missing on page 32 or is the numbering just off?
 - a) No, the RFP has been updated.
- 5) Can the facilities full time cook be subcontracted out to a Food Service provider to provide 3 meals a day and seven days a week?
 - a) Yes, however, see Item 16 in Attachment II: Standard Provisions for information regarding subcontractors.
 - b) Refer to Part 2: Scope of Work/Services - Outcome 4 for staff requirements.
- 6) What is the minimum number of units that that will be funded under this contract?
 - a) Three (3) units/beds is the minimum number of units that will be funded under this contract.
- 7) What is the maximum number of units that will be funded under this contract?
 - a) There are no maximum number of units identified at this time. This will be based on the number of contracts executed, number of units, and per diem rates allowed through NEDHSA current available funding.
- 8) Will NEDHSA allow proposers to include start up costs? If allowed, should this be built into the per diem or should a separate budget be constructed.?
 - a) All costs should be built into the per diem rate.
 - b) Start-up costs should not be included in the proposers costs as the per diem rate that is agreed up at contract execution shall be the rate that is continuous throughout the contract term and contract renewal.
 - c) Please refer to 1.28 for cost proposal scoring guidelines.
- 9) Can you please provide more information on Outcome 9: CONTRACTOR shall provide in-service training to NEDHSA clinic staff and other service provider staff within the NEDHSA integrated care system on a quarterly basis. In-service training shall be coordinated with the NEDHSA clinics and other service providers. What will the expectations of the contractor be? Is this a reimbursable service?
 - a) Outcome 9 requires the contractor to provide information to the NEDHSA clinical staff and other NEDHSA contractors/partners about the services provided including the referral process, program eligibility, and any other aspects of the program to recruit referrals.
 - b) This service is part of the contract deliverables and therefore costs related to in-service training should be built into the per diem rate.

- 10) Can the selected contractor also provide CPST/PSR to clients in the housing program and bill Medicaid?
- a) NEDHSA does not have the authority to answer questions regarding Medicaid billing and Medicaid service provisions.
- 11) On page 26 in outcome 2 it references that the contractor will provide services by appointment, walk in, or regularly scheduled meeting times around Mental Health, Substance Abuse and Health/Medical services. In reference to this:
- a) Is the contractor required to provide these services directly?
- i) These wraparound/case management services are to be provided to the residents in the transitional housing program directly.
- b) Is referral to community providers sufficient to meet this requirement?
- i) No, the transitional housing program provider must provide these services (wraparound/case management) to the residents. Please note: services provided are not substance abuse and mental health treatment services. Services provided are linkage to mental health and substance abuse treatment services along with any other services the resident may need that will aid in transition.
- c) Do these services need to be offered on site?
- i) These services may be offered off-site to the residents. However, the off-site location must be accessible to the residents.
- 12) In Outcome 3: PROVISION OF SERVICES, page 27 second paragraph, does NEDHSA have an acuity instrument that will be used to determine priority for admission or will the proposer be expected to identify the acuity instrument?
- a) The proposer will be expected to identify the acuity instrument. This instrument must be approved by NEDHSA prior to implementation.
- 13) Is the expectation that the facility is licensed by State of LA Bureau of Licensing?
- a) No, there is no licensing for transitional housing.
- 14) In OUTCOME 4: STAFFING AND FACILITY REQUIREMENTS, page 30 second paragraph, for the staff to resident ratio calculation, are children and spouses counted as "resident" or just the identified client?
- a) Children and spouses are counted as residents.
- 15) Are children eligible to be billed for the per diem?
- a) Children and spouses would be eligible to be billed a per diem. However, it is not expected that the children and spouses receive the major components and support services as required for the primary resident.
- 16) What is the budget for this project?
- a) A maximum budget has not been identified. The contract(s) that is executed will have a maximum contract amount.
- 17) What is the source of funding for this project?
- a) Source of funding for this project has not been allocated.
- 18) Is the funding source for the contract federal or state dollars?
- a) Funding could be a combination of federal and state dollars.
- 19) Are respite beds paid a per diem regardless of occupancy?

- a) This is negotiable. If a per diem is paid regardless of occupancy, there will be a limited amount of days.
- 20) How many respite beds are expected to be allocated?
a) No less than two beds.
- 21) Are the target population statistics referenced in the RFP from a needs assessment? If so please direct us to the assessment's publication.
a) Target population statistics referenced in the RFP were provided by the HOME Coalition Director.
- 22) Will clients need a direct referral from NEDHSA in order to be eligible for placement? If not, what are the referral sources?
a) Please refer to page 27 of the RFP.
- 23) Will a client need to be diagnosed with a substance abuse disorder to be eligible for placement?
a) The Contractor is expected to provide transitional housing services to individuals working toward recovery from mental and/or substance use problems and who are homeless as identified from the needs assessment.
- 24) With regards to staffing besides the Director, are there any minimum education or licensure requirements for the positions described in the RFP?
a) Please refer to 1.10.1 Mandatory Qualifications (page 8-9) and Part 2: Scope of Work/Services Outcome 4: Staffing and Facility Requirements (page 30-31)
- 25) The RFP references offering services by "walk-in", are these services only for residents of the project or for anyone?
a) These services are only for the residents.
- 26) In order to follow staffing guidelines, Is the client to staff ratio 10:1?
a) Yes
- 27) Staffing: Does the position of full time cook have to be the only duty of that person or can it be added into the duties of the direct care staff
a) No, refer to Part 2: Scope of Work/Services - Outcome 4 for staff requirements.
- 28) Stakeholder Support Letters: How many letters of support from stakeholders are sufficient?
a) At minimum, one support letter must be provided.
- 29) Cost Proposal: Is this similar to an annual budget? More detailed or less? Considering the contract would start in February and end in June, would the information only be considered for those 5 months instead of 12 months?
a) The cost proposal should include all costs associated with the per diem rate. It should be detailed to demonstrate required provision of services.
b) As a per diem rate, this rate should be inclusive of the daily costs to operate the program.