

ADDENDUM ONE, QUESTIONS and ANSWERS

Date: October 21, 2016
To: All Bidders
From: Nancy Storant / Robert Thompson, Buyer
AS Materiel State Purchasing
RE: Addendum for Request for Proposal Number 5444 Z1
to be opened December 13, 2016 at 2:00 p.m. Central Time

Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Proposal. The questions and answers are to be considered as part of the Request for Proposal. It is the Bidder's responsibility to check the State Purchasing Bureau website for all addenda or amendments.

<u>Question Number</u>	<u>RFP Section Reference</u>	<u>RFP Page Number</u>	<u>Question</u>	<u>State Response</u>
1.	IV.F.2.c	40	The RFP states that: "The Subrecipient shall input documentation for services provided to children and families in the DHHS N-FOCUS computer system using a format prescribed by DHHS." Will any payments be processed and paid by Subrecipient staff using N-FOCUS?	No payments will be processed or paid for by the Subrecipient through the use of N-FOCUS.
2.	IV.H.	45	<ul style="list-style-type: none"> • What reporting is available from N-FOCUS? • Can N-FOCUS import data with the Subrecipient's system? If so, what formats are required? • Can data be exported from N-FOCUS to the Subrecipient's system? If so, what formats are available? 	<p>N-FOCUS is a DHHS system containing confidential information. Access to N-FOCUS data is wholly at the discretion of DHHS.</p> <p>Section IV.H.1 states "The Subrecipient will use the State's Enterprise System (N-FOCUS) to perform all case management activities under this subaward."</p> <p>Data file importing into and exporting out of N-FOCUS is an option that can be discussed on a case by case basis once the sub-award is awarded.</p>
3.	V.2.A.i	54	The RFP states that: "The bidder must identify specific professionals who will work on the States project is awarded the contract ..." and that "The bidder shall provide resumes for all personnel proposed by the bidder to work on the project". May a bidder, who is not the incumbent, provide job descriptions for positions that will be filled after award and/or resumes for staff to serve in interim roles until permanent staff are hired and trained?	Bidders must provide job descriptions for positions that will be filled after the award is made and/or resumes for staff that will serve in interim roles until permanent staff are hired.

4.	RFP Cover Page; Scope of Service Importa nt Notice	RFP Cover Page	Will proprietary information be redacted from the response prior to being posted for public record?	<p>Refer to Section III, PP, Proprietary Information.</p> <p>Data contained in the proposal and all documentation provided therein, become the property of the State of Nebraska and the data becomes public information upon opening the proposal. If the bidder wishes to have any information withheld from the public, such information must fall within the definition of proprietary information contained within Nebraska’s public record statutes. All proprietary information the bidder wishes the State to withhold must be submitted in a <u>sealed package, which is separate from the remainder of the proposal, and provide supporting documents showing why such documents should be marked proprietary.</u> The separate package must be clearly marked PROPRIETARY on the outside of the package. Bidders may not mark their entire Request for Proposal as proprietary. Bidder’s cost proposals may not be marked as proprietary information. Failure of the bidder to follow the instructions for submitting proprietary and copyrighted information may result in the information being viewed by other bidders and the public. Proprietary information is defined as trade secrets, academic and scientific research work which is in progress and unpublished, and other information which if released would give advantage to business competitors and serve no public purpose (see Neb. Rev. Stat. § 84-712.05(3)). In accordance with Attorney General Opinions 92068 and 97033, bidders submitting information as proprietary may be required to prove specific, named competitor(s) who would be advantaged by release of the information and the specific advantage the competitor(s) would receive. Although every effort will be made to withhold information that is properly submitted as proprietary and meets the State’s definition of proprietary information, the State is under no obligation to maintain the confidentiality of proprietary information and accepts no liability for the release of such information.</p>
5.	J.	13	This section specifies that “The	DHHS does not separately track this information but DHHS has previously asked the lead agency not to allow employees to have contact

	Contract Personnel		<p>State reserves the right to require the Contractor to reassign or remove from the project any Contractor or Subcontractor employee." Has this ever happened?</p> <p>If it has happened, how many times?</p> <p>For each time, what was the reason?</p>	<p>with children and families until background check requirements are satisfied. Occasionally, a different case worker has been requested for unique cases requiring more experience.</p>
6.	1. Withholding	21	<p>Has the current contractor had any withholdings?</p> <p>If so for what reason and how much?</p>	<p>No, the current contractor has not had any monies withheld under the existing contract's withholding clause.</p>
7.	2. Penalties	21	<p>Has the current contractor had any withholdings? If so for what reason and how much was the penalty?</p> <p>Has the state had any penalties in the last two years and if so for what reason and how much?</p>	<p>No, the current contractor has not had any monies withheld under the existing penalty clause.</p> <p>Yes, the state was fined \$5,000 for contempt of court for failure to timely notify the parties of a placement disruption.</p>
8.	EE Penalty Section C	21	<p>If the sub recipient is compliant but there is a statewide penalty, will the sub recipient still be assessed?</p>	<p>Any statewide penalty assessed would be commensurate with the Subrecipient's noncompliance.</p>
9.	A. Project Overview	34	<p>Can you identify the assessment tools utilized?</p>	<p>See Section IV.C.1.c that states the Subrecipient will use the DHHS approved assessment model (currently DHHS uses the Structured Decision Making® assessment model).</p>

10.	<p>B. Project Environment</p> <p>Section 5</p>	34	<p>In order for the Subrecipient to be able to effectively conduct cases management services considerable discretion needs to be exercised by Subrecipient with regard to services provided to the bio family and youth. How much latitude will the Subrecipient have to determine the best course of services each family and case?</p> <p>What services must be preapproved by DHHS prior to being implemented?</p> <p>If preapproval is required, how quickly will DHHS approve services?</p> <p>Could all approvals be completed incumbent with case planning, with services identified as case plan goals?</p>	<p>The Subrecipient will have a great deal of latitude with recommending the services that children and families receive during on-going case management. Decisions about safety services during the Initial Assessment process will be made by DHHS. Service selection should be driven by the Family Strengths and Needs Assessment/SDM. For court involved families, DHHS will approve all case plans prior to submission to the court, which includes recommendations for services. The court ultimately decides which services will be provided via court orders. The Subrecipient will need to follow pre-approval protocol for services funded by Medicaid and /or the local Behavioral Health Regions.</p> <p>Do not understand this question.</p>
11.	<p>7. DHHS is the sole authority for:</p> <p>Sections a; b; c</p>	34	<p>What is the process for obtaining consent approving medical, mental health and substance abuse treatment for state wards?</p> <p>What latitude will the Subrecipient have in determining the best course of treatment for state wards?</p>	<p>In some cases the treating medical professional will contact DHHS directly to obtain consent for treatment. After hours, these requests are called into the hotline who will review and provide a decision. In other cases, the Subrecipient will electronically submit the "Medical Consent Form" to DHHS.</p> <p>See response to question #10.</p>

		<p>reporting?</p> <p>This is an important function of case management and can substantially impact the services provided to the families. In order to effectively manage cases and achieve outcomes the Subrecipient must have substantial decision making ability. What is the process for obtaining approvals for placement changes?</p> <p>How is the approval for an emergency placement move handled?</p> <p>Is DHHS staff available outside of regular business hours to approve moves?</p> <p>Placement of youth is one of the most important functions of the case management process and the Subrecipient requires substantial latitude to ensure placements can be made timely and to ensure</p>	<p>Emergency placement changes are made by the Subrecipient who contacts DHHS through the after-hours on-call system. The Subrecipient is responsible for notifying all legal parties and the courts about the placement change on the next business day. Emergencies during business hours are handled by the assigned DHHS Outcome Monitor.</p> <p>A DHHS supervisor and administrator are on call 24/7/365.</p>
--	--	--	--

			placement outcomes are met.	
13.	C. PROGRAM REQUIREMENTS FOR ON-GOING CASE MANAGEMENT <i>Section a. i.</i>	35	<p>The RPP requires the Subrecipient to perform all of the case management function. Is there any flexibility to allow for the Subrecipient to subcontract a portion of the case management services?</p> <p>A maximum level of subcontracting could be identified and defined by contract. The subcontracting process allows the Subrecipient time to focus on managing the system, instead of only working in the system. The Subrecipient would still be responsible for the overall outcomes and completion of case management tasks. This would allow for additional monitoring and supervision to be performed, strengthening the QA processes being performed on the system. Subcontractors could be selected and utilized in their area of expertise thus increasing the overall performance of the system. This has been successfully executed in other states such as Florida.</p>	DHHS currently requires that the role and function of on-going case management staff and the supervision of on-going case management staff not be subcontracted by the Subrecipient and that on-going case management staff must be direct employees of the Subrecipient. DHHS will consider proposals with second-tier subrecipients providing case management to the extent allowed by federal law, state statute, and applicable approved state plans.
14.	b. Train staff on the knowle	35	What criteria will the state use to determine whether or not the Subrecipient's training program will be allowed instead of the state	See Neb. Rev. Stat. §68-1214. The Subrecipient will be allowed to recommend changes to the DHHS training or implement its own training program provided the same complies with Neb. Rev. Stat. §68-1214.

	<p>dge, skills and abilities required to conduct and supervise case management.</p> <p>Sections i; ii; iii; iv</p>		<p>training system?</p> <p>Will the Subrecipient be allowed to recommend changes to the DHHS training?</p>	
15.	<p>c. Use the DHHS approved assessment model (currently DHHS uses the Structured Decision</p>	35	<p>Will DHHS allow any other assessment models to be utilized?</p>	<p>It is the State's strong preference to utilize the same assessment model (currently SDM); however, that does not preclude the Subrecipient from recommending an alternative assessment tool at any time once the subaward is issued. The state will permit or deny the use of an alternative assessment tool at its sole discretion.</p>

	n Making ® assessment model).			
16.	e. Develop a case plan: Section vi	36	Can a copy of the approved case plan and court report template be provided? Will the Subrecipient be able to suggest modifications to the templates? When was the template last modified?	Yes, attached is a copy of the currently approved case plan and court report templates. The Subrecipient will be allowed to recommend changes to the case plan and court report templates. The case plan template was last modified in 2013. The court report template was last modified in 2008.
17.	4. The Subrecipient will exhaust all other options prior to placing a child outside the family home. When placements	36	Will the Subrecipient be able to place youth in kinship homes prior to the home being licensed? If so, does DHHS have an identified timeframe within which the home must be licensed? What are the current DHHS foster home rates?	Yes, children can be placed in a kinship home prior to home being licensed, but it must be approved. 395 NAC 3-002 provides guidance on the approval process for unlicensed kinship and relative homes. No, DHHS does not have an identified timeframe. For those youth age 0 through 5 years old , DHHS shall pay the Subrecipient: \$20.00 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Essential Parenting Level of Care ; and, \$21.76 per day per youth for the provision of Agency Supported

	<p>outside the family home must occur, the Subrecipient will:</p> <p>Section i</p>		<p>Foster Care services at the Essential Level of Support.</p> <p>For those youth age 0 through 5 years old, DHHS shall pay the Subrecipient: \$27.50 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Enhanced Parenting Level of Care; and, \$28.17 per day per youth for the provision of Agency Supported Foster Care services at the Enhanced Level of Support.</p> <p>For those youth age 0 through 5 years old, DHHS shall pay the Subrecipient: \$35.00 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Intensive Parenting Level of Care; and, \$38.76 per day per youth for the provision of Agency Supported Foster Care services at the Intensive Level of Support.</p> <p>For those youth age 6 through 11 years old, DHHS shall pay the Subrecipient: \$23.00 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Essential Parenting Level of Care; and, \$21.76 per day per youth for the provision of Agency Supported Foster Care services at the Essential Level of Support.</p> <p>For those youth age 6 through 11 years old, DHHS shall pay the Subrecipient: \$30.50 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Enhanced</p>
--	---	--	--

			<p>Parenting Level of Care; and, \$28.17 per day per youth for the provision of Agency Supported Foster Care services at the Enhanced Level of Support.</p> <p>For those youth age 6 through 11 years old, DHHS shall pay the Subrecipient: \$38.00 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Intensive Parenting Level of Care; and, \$38.76 per day per youth for the provision of Agency Supported Foster Care services at the Intensive Level of Support.</p> <p>For those youth age 12 through 18 years old, DHHS shall pay the Subrecipient: \$25.00 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Essential Parenting Level of Care; and, \$21.76 per day per youth for the provision of Agency Supported Foster Care services at the Essential Level of Support.</p> <p>For those youth age 12 through 18 years old, DHHS shall pay the Subrecipient: \$32.50 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Enhanced Parenting Level of Care; and, \$28.17 per day per youth for the provision of Agency Supported Foster Care services at the Enhanced Level of Support.</p> <p>For those youth age 12 through 18 years old, DHHS shall pay the Subrecipient:</p>
--	--	--	--

			Is there a different rate for kinship placements?	<p>\$40.00 per day per youth for Out-of-Home Maintenance when the Nebraska Caregiver Responsibilities Score is at the Intensive Parenting Level of Care; and, \$38.76 per day per youth for the provision of Agency Supported Foster Care services at the Intensive Level of Support.</p> <p>The rates are the same for Kinship placements.</p>
18.	PROGRAM REQUIREMENTS FOR SERVI	37	What is the current number of foster and adoptive homes available in the Eastern Service Area?	As of October 10 th , 2016, there are approximately 500 licensed foster and adoptive homes in the Eastern Service Area. DHHS does not have separately licensed adoptive homes. As of October 10 th , 2016, there are 255 approved/unlicensed relative homes and 104 approved/unlicensed kinship homes in Eastern Service Area.

	<p>CE DELIV ERY</p> <p>Section 2</p>	<p>Is there currently sufficient capacity?</p> <p>If not how many homes are estimated for targeted recruitment to meet capacity?</p> <p>What efforts have been completed to reach capacity?</p> <p>What supports has DHHS provided to recruit homes?</p> <p>What are the current DHHS foster home rates?</p>	<p>Recruitment of foster homes is a continuous process and the need depends on fluctuating caseloads and needs.</p> <p>DHHS has a statewide recruitment and retention plan based on the needs of each Service Area. See: http://dhhs.ne.gov/children_family_services/Documents/NE%202015-2019%20Foster%20and%20Adop%20Parent%20Recruitment%20and%20Retention%20Plan.pdf</p> <p>DHHS remains responsible for licensing foster homes and establishing the standards for home studies. Currently, DHHS has a statewide advertisement campaign to promote foster home recruitment.</p> <p>It is expected that the bidder shall describe the specific strategies that will be utilized to develop and sustain the capacity of families needed to provide foster and adoptive care to children with unique and complicated needs in the Eastern Service Area.</p> <p>Please see answer to question #17.</p>
--	---	--	--

19.	D. PROGRAM REQUIREMENTS FOR SERVICE DELIVERY Section 1	Page 37	How many families have received services that included the “strengthening families approach” during the past 12 months, and of these, how many children who received services entered foster care?	It is expected that all responses to families include a strengthening-families approach, including children that have been placed in foster care.
20.	7. Subrecipient Execution of Contracts of Subaward: Section A	41	What is the process for obtaining approval for subcontracts? On average how long does the approval process take? It is common for subcontractors to <i>not</i> be approved?	Approval of subcontracts is through the Central Office and successful bidder will be provided with the appropriate contact information. DHHS is committed to providing prior written approval of second tier subrecipients within seven (7) business days of receipt of such request. While it is not common that second tier subrecipients are denied approval by DHHS, occasionally the denial of a subrecipient occurs.
21.	General question	41	Can you please provide the current funding amount which is budgeted for the procured services and what is the estimated budget for next	The total budgeted amount for this subaward for SFY 2017 was \$59,951,000. The budgeted amount for the SFY 2018/2019 Biennium Budget and subsequent years will be determined by the amounts awarded to the successful bidder through the RFP process.

	related to overall funding		fiscal year?	
22.	General question related to overall funding	41	Will the State of Nebraska provide copies of any existing provider budgets for the work in the RFP that have been submitted to the State or for which the State had to review or had to approve?	The total budgeted amount for this subaward for state fiscal year 2017 was \$59,951,000. The State does not review or approve the current Subrecipient's operating budget.
23.	G. FEDERAL AND STATE REQUIREMENTS Section 5	43	What was the annual cost last year for services? What do you anticipate the cost to be for the new RFP? Can you give the fixed and daily rates for the current Subrecipient? Is there a budgeted number for this contract?	The total budgeted amount for this subaward for SFY 2017 was \$59,951,000. See response to question #22 The current Subrecipient receives a fixed payment of \$2,092,900 per month. Additionally, the current Subrecipient receives \$39.30 per child per day for the total number of days in care each month. See response to question #21.
24.	I. Outcomes Section 3 a	46	The RFP states that DHHS will withhold a portion of the semi-monthly fixed payments as retainage. The retainage will be payable quarterly to Subrecipient based upon the degree of success achieving the three identified	The successful bidder will propose and commit to a retainage of not less than 3% of the total amount of the subaward.

			performance measures. Can you please specify the amount being considered for hold back?	
25.	I. Outcomes General	46/47	Will the State of Nebraska provide outcome data going back 3 years segmented by provider, region and for the State overall for every outcome identified as part of the RFP and ultimate provider contract?	Historical data as requested would not be representative or predictive of future cases due to the fact that direct Juvenile Justice youth are no longer in the care of DHHS per LB561 (2013).
26.	2. CORPORATE OVERVIEW a. BIDDER IDENTIFICATION AND INFORMATION	51	The RFP requires a Board of Directors with 51% of its membership comprised of residents from the State of Nebraska. Is there any flexibility in this requirement such as a local advisory council?	No. This is required by Neb. Rev. Stat. §43-4204. An out-of-state successful bidder will need to establish a legal entity with a Board of Directors that must include at least 51% Nebraska residents.
27.	Weekly Count of Youth by Placement	Attachment B	Will the State of Nebraska please identify how many children are currently placed in each level of care, including the different levels of foster care?	In Nebraska, there are not different levels of foster care. The reimbursement rate is determined by the level of responsibility a caregiver is willing to provide as determined by the Nebraska Caregivers Responsibility (NCR) tool. As of 10/3/16, the levels of responsibility are as follows for the 1,518

				<p>children in Eastern Service Area:</p> <p>Essential – 747</p> <p>Enhanced – 475</p> <p>Intensive – 198</p> <p>No Value Indicated – 98. These are children that were recently removed and caseworkers have 30 days to complete the NCR after initial removal.</p>																		
28.	Weekly Count of Youth by Placement	Attachment B	<p>During the last 12 months what is the average number of children who were eligible for adoption on a monthly basis. Will you please further break this number down according to age group?</p>	<p>On 10/17/2016, 190 children were eligible for adoption. The ages and frequency are as follows:</p> <p>0 - 5 =50</p> <p>6 – 10 =43</p> <p>11 – 15 =61</p> <p>16 – 19 =36</p> <p>During the last 12 months, the average point-in-time number of children eligible for adoption was 154 per month.</p> <table> <tr> <td>16-Oct</td> <td>193</td> </tr> <tr> <td>16-Sep</td> <td>184</td> </tr> <tr> <td>16-Aug</td> <td>175</td> </tr> <tr> <td>Jul-16</td> <td>177</td> </tr> <tr> <td>16-Jun</td> <td>179</td> </tr> <tr> <td>16-May</td> <td>183</td> </tr> <tr> <td>16-Apr</td> <td>156</td> </tr> <tr> <td>Mar-16</td> <td>140</td> </tr> <tr> <td>16-Feb</td> <td>138</td> </tr> </table>	16-Oct	193	16-Sep	184	16-Aug	175	Jul-16	177	16-Jun	179	16-May	183	16-Apr	156	Mar-16	140	16-Feb	138
16-Oct	193																					
16-Sep	184																					
16-Aug	175																					
Jul-16	177																					
16-Jun	179																					
16-May	183																					
16-Apr	156																					
Mar-16	140																					
16-Feb	138																					

				16-Jan 133 15-Dec 90 15-Nov 126 15-Oct 130
29.	Weekly Count of Youth by Placement	Attachment B	What is the average age of children in care?	As of 10/14/2016, the average age of children in care was 8.8 years.
30.	Weekly Count of Youth by Placement	Attachment B	What is the average length of time children are in care?	As of 10/17/16, the average length of time court involved children were in care was 520 days. The average length of time non-court involved children were in care was 97 days.
31.	Weekly Count of Youth by Placement	Attachment B	What is the average monthly placement cost during the last 12 months?	<p>The total budgeted amount for this subaward for SFY 2017 was \$59,951,000.</p> <p>The monthly average number of children served was 2,389.</p> <p>Attachment B includes the number of children and families served in Douglas and Sarpy counties by placement type.</p>
32.	Weekly Count of Youth by	Attachment B	How many children are placed in foster homes outside of the targeted service area?	<p>As of 8/25/16, the Eastern Service Area had 35 children in foster care out of state; 5 children with parents out of state; and 10 children in congregate care out-of state.</p> <p>As of 10/21/16, there are 125 children residing in placement types such as foster homes, relative and kin homes, group homes, YRTCs and</p>

	Placem ent			PRTFs in Nebraska outside of Douglas and Sarpy Counties. There are currently 5 youth placed at the YRTC that are case managed by the Eastern Service Area.																													
33.	Weekly Count of Youth by Placem ent	Attac hmen t B	Will Nebraska identify the current foster home providers and the number of homes each provider has in the Eastern service area?	<table border="1"> <thead> <tr> <th>Foster Home Providers</th> <th>Current # of All Foster Homes (licensed and approved) as of Oct 10th, 2016</th> </tr> </thead> <tbody> <tr> <td>APEX</td> <td>47</td> </tr> <tr> <td>Better Living</td> <td>1</td> </tr> <tr> <td>Building Blocks</td> <td>3</td> </tr> <tr> <td>Cedars</td> <td>2</td> </tr> <tr> <td>Child Saving Institute</td> <td>56</td> </tr> <tr> <td>Children's Square, USA</td> <td>22</td> </tr> <tr> <td>Boys Town</td> <td>73</td> </tr> <tr> <td>KVC</td> <td>105</td> </tr> <tr> <td>Lutheran Family Services</td> <td>35</td> </tr> <tr> <td>Nebraska Children's Home Society</td> <td>32</td> </tr> <tr> <td>NFC</td> <td>332</td> </tr> <tr> <td>NOVA</td> <td>16</td> </tr> <tr> <td>Omni</td> <td>75</td> </tr> </tbody> </table>	Foster Home Providers	Current # of All Foster Homes (licensed and approved) as of Oct 10th, 2016	APEX	47	Better Living	1	Building Blocks	3	Cedars	2	Child Saving Institute	56	Children's Square, USA	22	Boys Town	73	KVC	105	Lutheran Family Services	35	Nebraska Children's Home Society	32	NFC	332	NOVA	16	Omni	75	
Foster Home Providers	Current # of All Foster Homes (licensed and approved) as of Oct 10th, 2016																																
APEX	47																																
Better Living	1																																
Building Blocks	3																																
Cedars	2																																
Child Saving Institute	56																																
Children's Square, USA	22																																
Boys Town	73																																
KVC	105																																
Lutheran Family Services	35																																
Nebraska Children's Home Society	32																																
NFC	332																																
NOVA	16																																
Omni	75																																

39.	IV.D	36 (also page 43)	It states the contractor will be responsible for ensuring a sufficient amount of trained foster and adoptive parents are in the Eastern Service Area. If the state is responsible for licensing homes, is the contractor responsible for recruiting, completing homestudies and on-going support for the homes?	Yes, the Subrecipient or second-tier subrecipient is responsible for recruiting, completing homestudies and on-going support for the home.
40.	IV.D.1	37	<p>What evidence-based services are currently included in the child welfare service array?</p> <p>Are these services covered in the State Plan?</p>	<p>The current evidence-based services in Eastern Service Area includes:</p> <ul style="list-style-type: none"> Safe and Connected Trauma Systems Therapy Parenting with a Purpose CAFAS PSMAP Training Common Sense Parenting Safe and Connected Parenting with Love and Logic Common Sense Parenting Home Builders Casey Life Skills Assessment Circle of Security Family Finding Model 3-5-7 Model PCIT <p>DHHS is unable to respond to the second question because it is not clear what state plan the question refers to.</p>

41.	IV.E.2	38	<p>How many children from the Eastern Service Area are placed outside of the state of Nebraska?</p> <p>Are these all ICPC approved placements?</p>	<p>As of October 17, 2016, the Eastern Service Area had 63 youth placed out of state. Of those, 13 were in congregate care, 36 in foster care, and 14 were with a parent.</p> <p>All of these placements have been approved through ICPC.</p> <table border="1" data-bbox="1026 456 1541 1382"> <thead> <tr> <th data-bbox="1026 456 1285 610">Location of Congregate Care</th> <th data-bbox="1285 456 1541 610"># of Youth Placed as of October 17th, 2016</th> </tr> </thead> <tbody> <tr> <td data-bbox="1026 610 1285 662">Arizona</td> <td data-bbox="1285 610 1541 662">4</td> </tr> <tr> <td data-bbox="1026 662 1285 714">Iowa</td> <td data-bbox="1285 662 1541 714">4</td> </tr> <tr> <td data-bbox="1026 714 1285 766">Kansas</td> <td data-bbox="1285 714 1541 766">3</td> </tr> <tr> <td data-bbox="1026 766 1285 818">Michigan</td> <td data-bbox="1285 766 1541 818">1</td> </tr> <tr> <td data-bbox="1026 818 1285 870">Wyoming</td> <td data-bbox="1285 818 1541 870">1</td> </tr> <tr> <th data-bbox="1026 870 1285 1024">Location of Foster Homes</th> <th data-bbox="1285 870 1541 1024"># of Youth Placed as of October 17, 2016</th> </tr> <tr> <td data-bbox="1026 1024 1285 1076">Kansas</td> <td data-bbox="1285 1024 1541 1076">4</td> </tr> <tr> <td data-bbox="1026 1076 1285 1128">California</td> <td data-bbox="1285 1076 1541 1128">4</td> </tr> <tr> <td data-bbox="1026 1128 1285 1180">Colorado</td> <td data-bbox="1285 1128 1541 1180">2</td> </tr> <tr> <td data-bbox="1026 1180 1285 1232">Florida</td> <td data-bbox="1285 1180 1541 1232">1</td> </tr> <tr> <td data-bbox="1026 1232 1285 1284">Iowa</td> <td data-bbox="1285 1232 1541 1284">19</td> </tr> <tr> <td data-bbox="1026 1284 1285 1336">Nevada</td> <td data-bbox="1285 1284 1541 1336">1</td> </tr> <tr> <td data-bbox="1026 1336 1285 1382">Texas</td> <td data-bbox="1285 1336 1541 1382">4</td> </tr> </tbody> </table>	Location of Congregate Care	# of Youth Placed as of October 17 th , 2016	Arizona	4	Iowa	4	Kansas	3	Michigan	1	Wyoming	1	Location of Foster Homes	# of Youth Placed as of October 17, 2016	Kansas	4	California	4	Colorado	2	Florida	1	Iowa	19	Nevada	1	Texas	4
Location of Congregate Care	# of Youth Placed as of October 17 th , 2016																															
Arizona	4																															
Iowa	4																															
Kansas	3																															
Michigan	1																															
Wyoming	1																															
Location of Foster Homes	# of Youth Placed as of October 17, 2016																															
Kansas	4																															
California	4																															
Colorado	2																															
Florida	1																															
Iowa	19																															
Nevada	1																															
Texas	4																															

				<table border="1"> <tr> <td>Vermont</td> <td>1</td> </tr> <tr> <td>Location of Parent Homes</td> <td># of Youth Placed as of October 17, 2016</td> </tr> <tr> <td>Iowa</td> <td>12</td> </tr> <tr> <td>Utah</td> <td>1</td> </tr> <tr> <td>North Carolina</td> <td>1</td> </tr> </table>	Vermont	1	Location of Parent Homes	# of Youth Placed as of October 17, 2016	Iowa	12	Utah	1	North Carolina	1
Vermont	1													
Location of Parent Homes	# of Youth Placed as of October 17, 2016													
Iowa	12													
Utah	1													
North Carolina	1													
42.	IV.E.2.c	38	How many children from the Eastern Service Area are placed outside of the home?	As of October 17, 2016, there were 1695 children placed outside of home in ESA.										
43.	IV.E.2.c	38	How is secure transportation defined?	<p>Secure Transportation is defined as providing for the safe, secure, and humane treatment of youth during transport. During transport of youth referred by DHHS, the youth shall be placed under a full set of mechanical restraints. A full set of mechanical restraints shall be defined as a waist belt, handcuffs, and leg irons. The youth shall not be secured to any part of the transport vehicle. The youth shall not be maintained in mechanical restraints in the instance of an unforeseen circumstance that jeopardizes their safety and well-being (e.g., vehicle accident or fire). Youth shall be placed under mechanical restraints once the situation is controlled. A secured youth shall not be transported in the same vehicle at the same time as adult prisoners. Two (2) transport staff shall be utilized when transporting two (2) or more youth. At least one (1) transport staff shall be of the same gender as the youth being transported.</p> <p>One (1) transport staff may transport one (1) youth as long as the transport staff is of the same gender as the youth.</p> <p>Any male staff transporting a female youth shall have a female staff accompany the transport.</p> <p>Any female staff transporting a male youth shall have a male staff accompany the transport.</p>										

				<p>The Contractor shall not allow securely transported to possess or expend personal funds, possess or use tobacco products, cellular phones, or make phone calls during secure transport.</p> <p>During an extended secure transport, meals shall be provided to the youth. The driver shall utilize a restaurant drive-through or receive prior written approval to provide a meal with a restaurant. Extended transport shall mean any trips that is projected to last more than 3 hours.</p> <p>Law enforcement facilities shall be used, whenever possible, for restroom stops. If public rest stops need to be used, the restroom shall be vacated and the youth shall be accompanied into the restroom by Transport Staff of the same gender.</p>
44.	IV.F.1	39	<p>Certain activities which case managers perform may not be reimbursable under Title IV-E (i.e. certain administrative activities). How will the contractor be reimbursed for those costs?</p>	<p>Bidders will propose a fixed and variable rate intended to cover the bidder's expenses for administration and services. The State of Nebraska will request federal IV-E reimbursement for applicable administrative activities upon receipt of proper documentation from the Contractor. The expectation is that the Contractor will provide all necessary documentation that enables the State of Nebraska to maximize federal reimbursement for applicable administrative costs. Payments made by the State to the Subrecipient will not be impacted by whether or not federal reimbursement is received by the State but may be subject to any penalty incurred.</p>
45.	IV.F.2	40	<p>This appears to be a capitated rate structure. What are the residential and community service provider rates?</p>	<p>The current DHHS rates are: Group Home rate with overnight awake staff is \$116.00 per day per youth.</p> <p>Group Home Rate with overnight asleep staff is \$89.50 per day per youth.</p> <p>Emergency Shelter Center rate with overnight awake staff is \$146.00 per day per youth.</p>

				<p>Agency Supported Respite Care Rate is \$60.00 per day for six or more hours of care.</p> <p>Drug Testing Specimen Collection rate is up to \$60.00 per collection.</p> <p>Drug Testing Lab Confirmation rate is up to \$100.00 per confirmation test.</p> <p>Electronic Monitoring and Tracking rate is a maximum of \$59.00 per day per youth.</p> <p>Family Support Service rate is \$47.00 per hour of direct service delivery; and, \$18.00 per hour and a per mile rate established in the State of Nebraska's travel expense policies (currently \$.545 per mile) for travel time and distance to deliver Family Support Services.</p> <p>Intensive Family Preservation Rates are the following: Tier 1 Rate is \$4,096.26 per family; (travel distance is 15 miles or less) Tier 2 Rate is \$6,623.82 per family; (travel distance is 16 to 99 miles) Tier 3 Rate is \$8,746.50 per family; (travel distance is 100 miles or more)</p> <p>In-Home Safety Service rate is \$45.00 per hour for direct, face-to-face contact time with a family; and a per mile rate established in the State of Nebraska's travel expense policies (currently \$.545 per mile) for travel time and distance to deliver In-Home Safety Services.</p> <p>Parenting Time/Supervised Visitation rate is \$47.00 per hour of direct service delivery; and, \$18.00 per hour and a per mile rate established in the State of Nebraska's travel expense policies (currently \$.545 per mile) for travel time and distance to deliver Parenting Time/Supervised Visitation Services.</p>
--	--	--	--	--

			How are these rates determined and how often?	<p>These are the rates established and used by DHHS. Unless otherwise restricted by law or a specific provision of this RFP, the Subrecipient may negotiate with providers for a rates consistent with applicable laws and regulations including, but not limited to, 2 CFR 200 and Title IV-E of the Social Security Act.</p> <p>DHHS uses various methods to determine rates and intends to review rates every three years.</p>
46.	IV.F.2.c	40	<p>Is additional information about N-FOCUS available (minimum data set, required data elements)?</p> <p>Is there a possibility of integrating/linking our Electronic Health Record to this system?</p>	<p>N-FOCUS is the SACWIS system. It is also directly connected to Medicaid and Economic Support system. Data elements include all elements required by AFCARS, NCANDS, etc.</p> <p>Linking systems can be discussed.</p>
47.	IV.F.3	40	What are the current Child Placing Agency reimbursement rates?	See response to question #17
48.	IV.F.3	40	<p>What are the current foster care maintenance rates?</p> <p>Are they broken down by age groups?</p>	See response in Question #17

49.	IV.I.3.a. ii	46	Is the average length of stay that is referenced in this section (105 days), the ALOS in Case Management?	Yes
50.	IV.J.3.a	48	Could we charge a fixed Management Fee as the Indirect administrative fixed costs instead of listing Indirect administrative details?	No, the Subrecipient must provide detailed cost information to support the fee, comply with Section IV J. 3. a, and ensure all indirect costs follow any applicable regulation in 2 CFR 200 et seq.
51.	IV.J.3.a	48	What costs would be considered Direct vs. Indirect or does it align with the IV-E rules?	The distinction between direct and indirect costs should generally align with Title IV-E rules and with 2 CFR 200 et seq.
52.	IV.J.3.a	48	Are Direct Administrative costs included in the Annual Administrative Fixed Costs?	Yes
53.	IV.L.1	50	What expenses can be included in the Capacity Building Component (i.e. training, supervision, admin such as HR, ramp up of clients to CCs, etc.)	Capacity Building costs will include those reasonable and prudent costs incurred by the Subrecipient prior to July 1, 2017 that are necessary to build capacity in Nebraska to support transition planning, staff recruitment, and service contract procurement to permit Subrecipient to effectively commence full service case management for the Eastern Service Area on July 1, 2017.
54.	N/A		Is there a penalty for exceeding case load ratios of 1:17?	The State has not initiated a penalty for exceeding case load ratios of 1:17. Should the state of Nebraska be assessed a penalty for exceeding the case load ratio, the Subrecipient will be assessed a penalty commensurate with the Subrecipient's noncompliance (see EE. Penalty)
55.	N/A		What are the Supervisor to Caseworker ratios?	The DHHS system is intended to support a 1:6 supervisor to case worker ratio.
56.	N/A		What are the education requirements for Supervisors?	See IV.C.1.a.ii. Staff delivering ongoing case management and supervising ongoing case management must have a minimum of a Bachelor's Degree in social work, psychology, counseling, human development, education, criminal justice or other related area. Another

				Bachelor's Degree together with equivalent case management or human services experience is also acceptable.
57.	II. Q	6	"All bidders should be authorized to transact business in the State of Nebraska..." We have staff who work in Nebraska, but we do not have a Certificate of Good Standing, can we still bid and register to transact business at the same time?	Yes
58.	IV.A.2	34	Are the continuum of services expected to be developed prior to July 2017?	Yes, the service continuum must be in place with a July 1, 2017 contractor start date.
59.	IV.D.2	37	Are we expected to recruit, train and license homes prior to July 2017 or will we be able to use existing homes and then recruit, train and license new foster and relative homes?	The Subrecipient may choose to contract with those agencies who currently deliver foster care thus allowing the Subrecipient to utilize existing foster care homes. Continuity of services for children is paramount and strongly encouraged by the state. Please see response to question #58.
60.	IV.E.2.c	38	What does secure transportation mean?	See response to Question #43
61.	IV.G.3.ii	42	We are expected to provide continuum of services, but we can only use 35% of those services to service youth in care or to prevent youth from coming in care?	Neb Rev Stat §43-4204 provides that the bidder must have the ability to provide directly, or by contract through a local network of providers, the services required of a lead agency. A lead agency shall not directly provide more than thirty-five percent of direct services required under the contract. The 35% limitation is intended to limit the amount of services provided "in house" by the lead agency. The term "services" includes, but is not limited to foster care, congregate care, in-home services, and prevention services, and does not include case management.
62.	IV.G.3.f.i	43	What does "all licensing actions" mean? Isn't training a part of	All of the licensing requirements and licensing actions are listed in 395 NAC 3. Training is a licensing requirement. Licensing actions

			licensing?	are defined in 395 NAC 3-001.29.
63.	IV.H.1	44	Who is responsible for computer systems training (N-FOCUS, MMIS and CHARTS). Is Cornerstones of Care responsible or will staff attend training sessions provided by Nebraska DHHS.	DHHS will provide training on the use of its computer system.
64.	IV.H	44-46	In addition to mandatory entry into Nebraska DHHS computer systems, can client information and data be entered into the subrecipient's secure Electronic Health Record? If yes, can information be pulled from N-FOCUS in a data file to be pushed into the secure EHR?	Yes data can be stored in the Subrecipient's local system so long as State of Nebraska security guidelines are followed. Data file importing into and exporting out of N-Focus is an option that can be discussed on a case by case basis once the subcontractor is awarded.
65.	IV.H.30	46	Can we have our own Outlook email and then send emails encrypted from our system to the State of Nebraska?	Yes. The Subrecipient will be on the State of NE Outlook network and have direct e-mail access to all DHHS staff. The messages will not need to be encrypted so long as the messages are sent from and to the DHHS Outlook system.
66.	I.3.a	46	"DHHS will withhold a portion of the semi-monthly fixed payments as retainage." What portion? How is this determined?	The successful bidder will propose and commit to a retainage of not less than 3% of the annual do not exceed amount of the subaward. See response to question #69The bidder's proposed retainage percentage will be scored as part of the bidder's technical proposal.
67.	I.3.a.i	46	Recurrence of Substantiated Maltreatment. Our outcome is measured on youth who are or were not court involved? Even if we did not serve that youth	Yes. Court involvement is not necessary. A substantiated finding is what is required. Yes, we intend to use a 12 month rolling average.

			or family?	
68.	I.3.a.ii	46	Is the re-entry of any youth that we case managed?	Section IV.I.3.a.ii. does not refer to re-entry
69.	I.3.b	47	Regarding the following excerpt of this provision: "If the gross amount of the fixed payments plus variable payments made under this section is less than do not exceed amount at the end of each fiscal year of this subaward, the final reconciliation calculations will use a gross retainage equal to the bidder's proposed percentage of the sum of the fixed payments and variable payments received. The difference between the retainage to date at the end of the term and ten percent of the sum of the fixed payments and variable payments received will be first applied to any sums due DHHS under the end-of-term reconciliation and the balance, if any, will be payable to Subrecipient." Please provide further explanation of this provision.	Section IV.I.3.b. is amended to read: At the end of each quarter of this subaward, the Subrecipient will be entitled to receive a portion of the retainage based on the schedules set forth herein. Fifty percent of the retainage will be allocated to recurrence of substantiated maltreatment; twenty five percent of the retainage will be allocated to average length of stay for non-court involved children; and twenty five percent of the retainage will be allocated to average days to reunification for court involved children. The payment will be equal to the amount of retainage to date for each outcome multiplied by the applicable year to date percentages less any retainage payments already paid to subrecipient. Payments will be made under this paragraph within thirty (30) days after the end of the quarter and reconciled at the end of each fiscal year of this subaward. If the gross amount of the fixed payments plus variable payments payable under this section for any fiscal year is less than do not exceed amount for that fiscal year, the year-end reconciliation calculations will use an adjusted gross retainage equal to the bidder's proposed percentage multiplied by the sum of the fixed payments and variable payments. The difference between the retainage to date at the end of the term and the adjusted gross retainage will be first applied to any sums due DHHS under the end-of-term reconciliation and the balance, if any, will be payable to Subrecipient. The retainage will be completed on an annual basis for each fiscal year. Retainage will be calculated separately for each fiscal year.
70.	L.	50	Capacity Building allowable costs shall not exceed \$300,000. Expenses incurred prior to July 31. How is reasonable and prudent	All costs must be allowable under all applicable cost principles and provisions contained in 2 CFR 200 et seq.

			determined?	
71.	V.A.2.a	51	<p>If we do not currently have a board in Nebraska, will we be given time to create that board?</p> <p>If so, how much time be allowed?</p>	<p>Yes, the board must be established prior to execution of the final subaward documents.</p> <p>Before final contract is signed.</p>
72.	V.A.d	52	<p>When do we need to identify our office location?</p> <p>Can it be upon award or within a specified time thereafter?</p>	<p>The entity submitting the proposal response must provide its information including location in the proposal response. Any Nebraska entity formed after notice of award must submit its information, including office location, prior to execution of the final subaward documents.</p>
73.	I., SCO PE OF THE REQ UES T FOR PRO POS AL	1	<p>1) Is it the intent of DHHS to award multiple contracts from this Procurement?</p> <p style="padding-left: 40px;">a. Fixed and variable reimbursement rates are tied to the size of the population served, therefore, is it DHHS's intent for Contractors to submit a cost proposal that accounts for single or multiple awards?</p> <p style="padding-left: 80px;">i. How many contracts may be potentially awarded, and what is the range of the minimum and</p>	<p>Although DHHS do not anticipate an award to multiple bidders, the State reserves the right to award to more than one bidder.</p>

			<p>maximum contract value?</p> <p>b. Please describe in detail the criteria or contract allocation methodology for awarding multiple contracts among 2 or more Contractors.</p>	
74.	I., A. SCHEDULE OF EVENTS	1	1) If DHHS awards a contract to more than one Contractor, please describe how the DHHS Schedule of Events might be impacted.	The State does not anticipated awarding to multiply bidders but it would not affect the Schedule of Events.
75.	III, TERMS AND CONDITIONS, EE. PENALTY	21	<p>1) Does DHHS claim IV-E costs for initial and ongoing Contractor(s) and subcontractor(s) case worker training?</p> <p>2) Can the contractor claim these training costs for IV- E with a cost allocation plan methodology and incorporated in the states approved plan??</p>	<p>1) Yes, it is the intent of the State to claim IV-E costs for the Subrecipient's caseworker training.</p> <p>2) The State is responsible for all Title IV-E claiming. The State will expect the subrecipient to submit to the State a cost allocation plan to be incorporated in the State's plan. Compensated through a fixed and variable cost payment. See Cost Proposal Requirements, Section V.B. The State of Nebraska will request federal IV-E reimbursement for applicable administrative and training activities upon receipt of proper documentation from the Contractor. The expectation is that the Contractor will provide all necessary documentation that enables the State of Nebraska to maximize federal reimbursement for applicable administrative</p>

			<p>3) Does the DHHS require that the contractor(s) utilize DHHS-administered training for Contractor and Subcontractor case managers?</p> <p>a. Should training costs be included in the cost proposal?</p>	<p>costs. Payments made by the State to the Subrecipient will not be impacted by whether or not federal reimbursement is received by the State subject to any penalty provision in the subaward.</p> <p>3) The State is not requiring the Subrecipient to utilize the DHHS administered training for case managers but the training must comply with Neb. Rev. Stat. §68-1214. All training costs should be included in the bidder's cost proposal.</p>
76.	IV. PR OJE CT DE SC	36	1) Please clarify the DHHS requirement to provide case management of youth at YRTC or who are dually-adjudicated.	The Subrecipient is required to provide case management to youth from the Eastern Service Area who have a child abuse/neglect adjudication and are in the legal custody of DHHS and have been court ordered to either the Kearney or Geneva YRTC.

	RIP TI ON AN D SC OP E OF WO RK, C. PR OG RA M		<p>a. Currently a child can be both classified as abuse/neglect and juvenile justice-involved.</p> <p>b. Who is responsible for case management</p> <p>c. Will the cost for detention be expected to be covered by the Contractor?</p> <p>d. Is requirement 2c. specific to 3A cases only? If not, please clarify.</p>	<p>Youth in the custody of DHHS who are also on probation will be case managed by the Subrecipient who will work closely with the assigned Probation Officer.</p> <p>The Subrecipient is only expected to pay detention cost for a limited number of OJS wars who were committed to OJS prior to October 1, 2013.</p> <p>Yes, case management for youth at YRTCs is limited to those children that have pending 3a petitions.</p>
77.	IV. PR OJE CT DES CRI PTI ON AN D SC OP E OF	37	<p>1) Is it DHHS' intent for DD-eligible and DD-diagnosed youth service and placement costs be included in the cost proposal?</p> <p>2) Will DD youth be required to be placed in a DD home or in a licensed community based home like setting?</p>	<p>The successful bidder will be required to provide recommended services not provided by other sources of funding.</p> <p>Children in the care and custody of DHHS are to be placed in the least restrictive environment that provides for the child's best interest.</p>

	WORK, D. PROGRAM REQUIREMENTS FOR SERVICE DELIVERY, 4. c.			
78.	IV. PROJECT DESCRIPTION AND SCOPE	37	<ol style="list-style-type: none"> 1) Does this exclude the possibility subcontracting the delivery of services? 2) Is the allocation of dollars to provide this service included within this Contract award? 3) Please confirm if the Contractor-administered Independent Living 	<ol style="list-style-type: none"> 1) No 2) Yes 3) Yes, the successful bidder is responsible for independent living costs for state wards prior to age 19.

	E OF WO RK, D. PR OG RA M RE QUI RE M ENT S FO R SER VIC E DEL IVE RY, 3		<p>programs and services should be included in the Contractor's cost proposal.</p> <p>4) Is it the intent of DHHS to support the Contractor's programs with Chafee funding?</p> <p>5) Is the contractor expected to provide services up until the young adult is age 21?</p>	<p>4) The use of Chafee funding is at the discretion of DHHS</p> <p>5) No, the Subrecipient will be expected to provide services up to the age of 19.</p>
79.	IV. PRO JEC T DES CRI PTI ON AND SCO	38	<p>1) Please define or describe the DHHS definition of "seamless."</p>	<p>1. Seamless: Collaborating in order to coordinate the transition of case management from Initial Assessment to On-going case management in order to best facilitate a family's access to services, reduce unnecessary duplication of effort, and produce positive child and family level outcomes.</p> <p>2.A Court-involved cases involve a face to face meeting immediately following the Protective Custody Hearing. Most of the information is discussed at the Pre-Conference Hearing prior to the court hearing. On-</p>

	PE OF WO RK, E. AD MINI STR ATI VE REQ UIR EM ENT S, 1.		<p>2) Please describe the “seamless” process of transferring an Initial Assessment (IA) case to ongoing case management.</p> <p>a. Please describe the role of DHHS IA staff.</p> <p>b. Please describe the role the DHHS envisions of the successful contractor(s) as a partner in this process.</p>	<p>going Case Managers are introduced to the family just before the court hearing.</p> <p>Non-court involved families; face to face meetings are pre-scheduled to facilitate the sharing of information and how the safety plan will be monitored. When a safety plan is not needed, a meeting in the family home occurs with both the IA and On-going case managers.</p> <p>B. DHHS expects that the Subrecipient would be a collaborative partner that would demonstrate flexibility, responsiveness and proactively problem solve.</p>
80.	IV. PR OJE CT DE SC RIP TI ON AN D SC OP E	43	1) Is it the intent of DHHS for the Contractor to license foster homes?	No, See Section VI.B.6.d

	OF WO RK, G. FED ER AL AND STA TE REQ UIR EM ENT S, 3. G. Chil d Plac eme nt Pra ctic es			
81.	IV. PRO JEC T DES CRI PTI ON AND SCO	43	1) Does the IV-E waiver extend beyond the end of the DHHS contract term?	The State's Title IV-E waiver ends on June 30, 2019.

	PE OF WORK, G. FEDERAL AND STATE REQUIREMENTS, 4. Waiver Demonstration			
82.	IV. PROJECT DESCRIPTION AND SCOPE OF WORK	50	<ol style="list-style-type: none"> 1) Please provide details on the allowable costs for capacity/start-up building. 2) Should DHHS award two (2) or more contracts from this RFP, is each Contractor able to receive the \$300,000 in start-up and capacity building costs? 3) Is it DHHS' intent to contract separately for 	<ol style="list-style-type: none"> 1) See response to question 53 2) DHHS does not anticipate awarding to multiple bidders, If multiple bidders are awarded each would be entitled to actual and allowable expenses up to \$300,000. 3) Capacity building is included in the RFP in Section IV.L.2, But, the compensation for capacity building is not to be included in the fixed or variable rate and invoiced separately.

	K, L. CAPACITY BUILDING COMPONENT, 1.		the capacity building and start-up cost components?																																				
83.	IV. PROJECT DESCRIPTION AND SCOPE OF WORK, I. OUTCOMES, 3a, iii	47	1) In the RFP, "Average Length Of Stay for Non-Court Involved Children," it states, <i>"This outcome measures the average length of stay, in days, on a rolling 12-month average, for non-court children who exited care. The Subrecipient ("Contractor") is expected to achieve 105 average days or lower. The percentage of the retainage payable is dynamic and will be calculated using the straight line method between the range of 105 days and 125 days."</i> Please provide the following data points: <ul style="list-style-type: none"> a. What is the current average length of stay for: 	<p>Historical data as requested would not be representative or predictive of future cases due to the fact that direct Juvenile Justice youth are no longer in the care of DHHS per LB561 (2013). See additional details in the response to Question #25. Exit Cohort for Non-Court Involved Youth</p> <table border="1"> <thead> <tr> <th>Exit Month</th> <th>Youth Count</th> <th>Average Days</th> <th>Min Days (>7)</th> <th>Max Days</th> </tr> </thead> <tbody> <tr> <td>Jan 2015</td> <td>124</td> <td>141</td> <td>20</td> <td>540</td> </tr> <tr> <td>Feb 2015</td> <td>104</td> <td>106</td> <td>8</td> <td>267</td> </tr> <tr> <td>Mar 2015</td> <td>160</td> <td>146</td> <td>10</td> <td>544</td> </tr> <tr> <td>Apr 2015</td> <td>158</td> <td>121</td> <td>8</td> <td>492</td> </tr> <tr> <td>May 2015</td> <td>205</td> <td>120</td> <td>8</td> <td>475</td> </tr> <tr> <td>Jun</td> <td>157</td> <td>113</td> <td>13</td> <td>677</td> </tr> </tbody> </table>	Exit Month	Youth Count	Average Days	Min Days (>7)	Max Days	Jan 2015	124	141	20	540	Feb 2015	104	106	8	267	Mar 2015	160	146	10	544	Apr 2015	158	121	8	492	May 2015	205	120	8	475	Jun	157	113	13	677
Exit Month	Youth Count	Average Days	Min Days (>7)	Max Days																																			
Jan 2015	124	141	20	540																																			
Feb 2015	104	106	8	267																																			
Mar 2015	160	146	10	544																																			
Apr 2015	158	121	8	492																																			
May 2015	205	120	8	475																																			
Jun	157	113	13	677																																			

				i. FY '16 by month	2015				
				ii. FY '15 by month	Jul 2015	170	116	10	296
				iii. FY '14 by month	Aug 2015	158	120	8	392
					Sep 2015	165	109	8	336
					Oct 2015	171	112	9	649
					Nov 2015	151	124	15	676
					Dec 2015	151	99	10	318
					Jan 2016	168	112	8	284
					Feb 2016	151	98	9	369
					Mar 2016	168	100	16	356
					Apr 2016	164	123	18	665
					May 2016	153	99	16	270
					Jun 2016	170	104	11	325
					Jul 2016	119	123	12	786
					Aug 2016	117	126	14	409
					Over all	3084	115	8	786

			<p>2) Please answer the questions below and provide the DHHS methodology for calculating the following:</p> <p>a. Regarding a non-court involved case: In a case in which DHHS is managing a case and on day 31, the case is referred to the Contractor for ongoing case management.</p> <p>ii) In this example, is the Length of Stay starting when the case transfers to case management, or on the day the DHHS began its</p>	<table border="1" data-bbox="1037 287 1581 406"> <tr> <td data-bbox="1037 287 1581 329">Days in Care > 7</td> </tr> <tr> <td data-bbox="1037 329 1581 371">Based on Exit Cohort Jan 2015 - Aug 2016</td> </tr> <tr> <td data-bbox="1037 371 1581 406">Duplicated Counts</td> </tr> </table> <p>2)</p> <p>a. The length of stay is determined by the legal status begin date, which is the day full case management and services begins.</p> <p>b. In most cases, the legal status begin date begins on or after the</p>	Days in Care > 7	Based on Exit Cohort Jan 2015 - Aug 2016	Duplicated Counts	
Days in Care > 7								
Based on Exit Cohort Jan 2015 - Aug 2016								
Duplicated Counts								

			<p>case?</p> <p>b. What is considered the begin date?</p> <p>c. What is the legal status start date?</p> <p>d. What is the case start date, i.e the date in which the Contractor will begin to be measured by?</p> <p>e. How will the DHHS ensure that the case start date in N-FOCUS matches with the date of referral to the Contractor?</p> <p>i) If the N-FOCUS start date and the date of referral to the Contractor are different, please</p>	<p>investigation process depending on the safety and risk scores as determined by the SDM assessments.</p> <p>c. Legal status begin and legal status start day are the same. The day the state becomes actively involved with the ongoing case management.</p> <p>d. The start date will be the day the contract begins and will include currently open cases.</p> <p>e. DCFS staff set the legal status begin date simultaneously with the referral to the subrecipient.</p> <p>i) DHHS does not expect to have errors between the case begin date and the referral date. If this were to occur an adjustment could and would be made if deemed necessary.</p> <p>f. The end date is the day the cases closes and DCFS formally ends ongoing case management.</p>
--	--	--	---	--

			<p>provide the reconciliation process to resolve the differences between the two.</p> <p>f. Please provide detail on the DHHS' determination of the case end date.</p> <p>3) In situations involving non-court involved youth and their family to be transferred to a court team and be designated as "wards." In the DHHS calculation of non-court youth, will the DHHS include those youth who transferred to ward status in its calculation?</p> <p>a. Please provide or describe the definition of the Legal Status end date?</p> <p>i. To non-ward?</p>	<p>3) No. The court and non-court episodes are calculated independent of one another, where applicable.</p> <p>a. Case closure means the 1) safety and risk does not rise to the need for court intervention; or the children are safe and the risk is low to moderate; or the family is unable to be located or 2) decision and process on the successful achievement of goals and outcomes of a child/family that eliminate the need for services and supervision.</p> <p>b. The date the ongoing case management services end</p> <p>4) Please see 3 above.</p>
--	--	--	--	--

			<p>ii. To ward?</p> <p>b. What is the case end date?</p> <p>4) We respectfully request further clarification from DHHS regarding the process for determining the “begin” and “end” dates for case management.</p> <p>i) When a non-court case transfers to court, how is this factored into the equation?</p>	
84.	IV. PRO JEC T DES CRIP TI	47	1) In the RFP, Recurrence of Substantiated Maltreatment, it states, “This outcome measures the rate of recurrence, expressed as a percentage, of substantiated	1) Yes, DHHS uses the federal definition.

	<p>ON AND SCOPE OF WORK, I. OUTCOMES, 3a, i.</p>		<p>maltreatment in a 12-month period in the Eastern service area, whether or not the child was involved with the court system. The Subrecipient is expected to achieve 6.60% or lower recurrence of maltreatment. The percentage of the retainage payable is dynamic and will be calculated using the straight line method between the range of 7.40% and 6.60%. The following chart demonstrates the percentage payable at certain points along the straight line. Is the following federal definition being used for this measure?</p> <p>a. <i>“Of all children who were victims of a substantiated or indicated report of maltreatment during a 12-month period, what percent were victims of another substantiated or indicated report of</i></p>	
--	--	--	--	--

			<p><i>maltreatment within 12 months of their initial report?”</i></p> <p>b. Does this measure include children and youth that were not involved with Contractor case management during this 12-month timeframe when the recurrence occurred?</p> <p>i. In the following example:</p> <p>In other words, in a situation where a child is not referred to the Contractor prior to the 2nd substantiation, please provide or describe in detail the DHHS intent to attribute the previous substantiation(s) to the Contractor’s performance.</p>	<p>b.Yes</p> <p>In order to keep the measure simple and applicable to all Service Areas, DHHS uses the Round 3 Data Indicators as the basis for this measure. Following the federal calculation ensures objectivity and consistency across the state.</p>
85.	N/A	N/A	1) Please provide the process for each potential Respondent to request pertinent program and agency data during our review and consideration of the RFP.	Bidders have opportunities to ask questions as outlined on the schedule of events.

86.	IV. PRO JEC T DES CRIP TI ON AND SCO PE OF WO RK, I. OUT COM ES , 3a, iii.	47	<p>1) In the RFP, Average Days to Reunification for Court Involved Children, it states, “This outcome measures the average length of stay, in days, on a rolling 12-month average, for court children who exited care and the permanency achieved was reunification. The Subrecipient is expected to achieve 385 average days or lower. The percentage of the retainage payable is dynamic and will be calculated using the straight line method between the range of 385 days and 425 days. Please describe the DHHS methodology for the permanency date in situations wherein the youth is returned home on a reunification plan, yet the DHHS continues to maintain custody via a court order for a period of time.</p> <p>a. For the purposes of calculating the permanency (reunification date) for this</p>	<p>1) No adjustment is made for trial home visits. This is a simple case open to case close measure.</p> <p>a. Legal date of discharge</p>
-----	--	----	---	--

			<p>specific measure, will DHHS use the return home date or the legal date of discharge from care?</p> <p>b. Furthermore, will DHHS utilize the same methodology for calculating Length of Stay for children with varying permanency objectives (i.e. reunification, adoption, guardianship)?</p> <p>c. Please describe or define the data field within N-FOCUS that captures both the return home date and the legal date of discharge from care.</p> <p>2) Please provide the definition reunification for the purposes of calculating this measure.</p> <p>a. Is it DHHS intent to base the definition consistent with the federal definitions of reunification?</p> <p>b. In a situation in which the child is returned on a trial home visit and the child is no longer in state custody a period of time later, which</p>	<p>b. This measure is limited to reunification, which includes custody with guardian and custody with parent.</p> <p>c. Placement date captures the return home date while legal status end date captures the discharge from care date.</p> <p>2) This measure is limited to reunification, which includes custody with guardian and custody with parent.</p> <p>a. No. This measure is limited to reunification, which includes custody with guardian and custody with parent.</p> <p>b. The end date is the date the legal custody for DCFS ends. There is no adjustment for trial home visits.</p> <p>3) See 2 above</p>
--	--	--	--	---

- date is deemed the reunification date?
- 3) Please define the definition of the phrase “exited care” and “reunification criteria” as used within the cited question.
- (1) court children who exited care and the permanency achieved was reunification.
1. Exited care
 2. Reunification criteria
- 4) What is the current average length of stay for Court Involved Children who were reunified during the following time periods, and consistent with the DHHS definition of reunification:
- a. FY '16 by month
 - b. FY '15 by month
 - c. FY '14 by month

4) Historical data as requested would not be representative or predictive of future cases due to the fact that direct Juvenile Justice youth are no longer in the care of DHHS per LB561 (2013). See additional details in the response to Question #25.

Exit Cohort for Court Involved Youth

Exit Month	Youth Count	Average Days	Min Days (>7)	Max Days
Jan 2015	50	417	92	1390
Feb 2015	49	497	10	1622
Mar 2015	57	438	36	1296
Apr 2015	46	308	8	1067
May 2015	44	470	8	1314
Jun	50	480	76	1482

				2015				
				Jul 2015	33	510	84	1462
				Aug 2015	82	391	9	1185
				Sep 2015	76	351	68	1357
				Oct 2015	60	406	10	1444
				Nov 2015	45	371	70	822
				Dec 2015	41	432	130	961
				Jan 2016	47	341	22	1476
				Feb 2016	43	359	24	1370
				Mar 2016	56	334	10	1418
				Apr 2016	56	506	8	1963
				May 2016	69	378	10	2280
				Jun 2016	58	455	64	1139
				Jul 2016	72	352	55	1602
				Aug 2016	57	353	32	819
				Overall	1091	403	8	2280

		<p>5) Please define how the Length of Stay for Court Involved Children who were reunified calculated.</p> <p>6) Please define or describe how the beginning date of the Length of Stay measure is calculated.</p> <p>7) Please define how DHHS will incorporate the Legal status start date into this measure.</p> <p>8) Please describe how the date of case transfer to Contractor ongoing case management is factored into this measure.</p> <p>9) Please describe how the end date is calculated for this measure.</p> <p>Please describe or define the how the data fields within N-FOCUS will support an accurate reconciliation for</p>	<p>5) Length of stay was calculated by the time the youth was involved with ongoing services until discharge of services and ongoing case management.</p> <p>6) This is the date the ongoing case management and services begin.</p> <p>7) See 5 above.</p> <p>8) All cases in care at transfer will continue to be measured. DHHS cannot separate those youth.</p> <p>9) See 5 above. DHHS do not expect reconciliation to be required but will be on a case by case basis.</p>
--	--	--	--

			determining the beginning and end dates for case management.	
87.	IV. Project Description and Scope of work B. Project Environment #5	35	DHHS will be the final authority on all decisions related to case management. Does this include day to day interaction with the child, family or out of home provider or does the authority relate to the legal status of the child. If possible provide a list of items that will not need DHHS authority.	DHHS is the legal guardian of children placed in its care and every case management decision is ultimately through DHHS authority. DHHS's authority relates to the legal status of the child. Day to day interaction with the child, family, or out-of-home provider is not anticipated. However, there may be situations in which DHHS overrides a case management decision of the Subrecipient.
88.	IV. Project Description and Scope of work B. Project Environment #9	36	Will the current NFC/DHHS Operations Manual be provided during the bidding process and if so how can we access the same?	Yes, it is posted on the DAS website. https://statecontracts.nebraska.gov/Search/SearchResults The most recent amendment is in the process of being uploaded to the DAS website.
89.	IV. Project Description	37	Is the DHHS approved case plan and court template currently part of the N-FOCUS system and will the	Yes to both the case plan and court report. Both are in N-FOCUS.

	<p>tion and Scope of work</p> <p>C. Program requirements for On-Going Case Management</p> <p>1.e</p>		<p>Subrecipient be allowed to directly enter and develop case plans and to also up date in the system?</p>	
90.	<p>D. Program Requirements for Service Delivery 1-6</p>	37,38	<p>The RFP indicates that "All other costs not listed in IV.F4 above, and that are associated with the performance of this subaward, are the responsibility of the Subrecipient. This includes, but is not limited to: court ordered services for which Subrecipient is unable to secure alternate funding sources." Can the state provide examples of the court ordered services for which the current vender has been responsible?</p>	<p>For example, a court may order a placement at a PRTF that is determined not to be medically necessary.</p>
91.	<p>D. Program Require</p>	37,38	<p>The RFP notes that "the bidder shall identify strategies for raising private dollars to support its operations." Must these strategies</p>	<p>The intent of the State is to create a Public/Private Partnership with the Subrecipient whereby the State and the Subrecipient can leverage private dollars to enhance services and supports in the Eastern Service Area.</p>

	ments for Service Delivery 1-6		be planned and implemented in the event that Medicaid billing and this state-funded contract adequately meet programmatic needs?	
92.	IV. Project Description and Scope of work E. Administrative Requirements, 6. Second Tier Subrecipients ; a.	38	Will the Subrecipient have the ability or access to appropriate systems in order to track the delivery of behavioral health services even though they are paid by another funding source (i.e. Medicaid)?	Not in the form of an extract of service claims. It's expected however that the agency providing foster care include in their monthly report information on the youth's well-being, educational needs, physical health and services provided that may have been ordered by a separate entity
93.	D. Program Requirements for Service Delivery, 1	39	The RFP indicates that the "Subrecipient may not allow a subcontractor or second tier Subrecipient to further subcontract for services, other than foster family care, under this subaward." Please define the activities that constitute foster family care. Can a sub recipient contract with a	1. Foster care shall have the same meaning as found in Neb. Rev. Stat. §71-1901. 2. Section IV E. 6. a. does not currently allow a subcontractor or second tier Subrecipient to further subcontract or subaward for services. DHHS will consider proposals that contemplate a second-tier subrecipient or subcontractor further subcontracting or subawarding for services. Any such proposal must demonstrate how the Subrecipient will ensure that all subcontractors and subrecipients

			<p>second tier subrecipient to facilitate reunification and/or promote permanency?</p> <p>Are home studies and quarterly reviews also the responsibility of the State?</p>	<p>comply with all requirements of this subaward and applicable federal, state, and local laws, ordinances, rules and regulations. Subrecipient may not allow a subcontractor or second tier Subrecipient to further subcontract or subaward for services requiring direct contact with children or families without strictly complying with all provisions regarding background checks.</p> <p>3. Home studies are the responsibility of the Subrecipient and Subrecipient bears the cost. The cost of home studies prepared by Agency Supported Foster Care providers is generally included in the agency supported foster home rates.</p> <p>4. It is not clear what quarterly reviews the bidder is referring to.</p>
94.	D. Program Requirements for Service Delivery, 2	40-41	<p>The RFP notes that the "Subrecipient and Second Tier Subrecipients will pay foster families the same foster care maintenance rate paid to foster families by DHHS. The Subrecipient and Second Tier Subrecipient's will pay child placing agencies the same administrative rate paid to child placing agencies by DHHS. DHHS reserves the right to revise the administrative rate to ensure that it remains a reasonable match with actual administrative costs." Does this requirement preclude a subrecipient making bonus payments to foster care providers or adjusting payments, as</p>	<p>Payments to placing agencies or foster families have to be consistent with state statutes and 2 CFR 200. DHHS is not opposed to having the Subrecipient enter into performance based contracts or subawards with subcontractors or second tier subrecipients.</p>

			necessary, to meet the demands of an evidence based model or address needs that may preclude a placement disruption, based on performance and with DHHS approval?	
95.	F. Financial Requirements 2. Source documentation/Service Expenditures 2.b	41	Does the current N-FOCUS system support the ability to retain Electronic copies of required documents? Does N-Focus have the ability to track these documents or will the Subrecipient need to maintain an additional EHR to achieve this requirement?	Yes. N-FOCUS has a full featured document scanning and storage system in place.
96.	G. Federal and State Requirements 4. Waiver Demonstration	44	Will the Subrecipient provide permanency case management to the Title IV-E Waiver Project Children and families? If yes will there be an additional per child rate negotiated for these children? What is the current rate?	The Subrecipient is required to provide Full Service Case Management for every child referred. Currently, Alternative Response cases are not referred.
97.	V. Proposals	55	The RFP notes that "the bidder shall identify strategies for raising	See response to Question 91.

	al Instructi ons; A. Propos al Submis sion; 3. Technic al Approa ch, a. Technic al Approa ch; xvi.		private dollars to support its operations." Must these strategies be planned and implemented in the event that Medicaid billing and this state-funded contract adequately meet programmatic needs?	
98.	II. Q	6	"All bidders should be authorized to transact business in the State of Nebraska..." We have staff who work in Nebraska, but we do not have a Certificate of Good Standing, can we still bid and register to transact business at the same time?	See Answer to Question 57
99.	IV.A.2	34	Are the continuum of services expected to be developed prior to July 2017?	See Answer to Question 58
100.	IV.D.2	37	Are we expected to recruit, train and license homes prior to July 2017 or will we be able to use existing homes and then recruit, train and license new foster and relative homes?	See Answer to Question 59

101.	IV.E.2.c	38	What does secure transportation mean?	See Answer to Question 60
102.	IV.G.3.ii	42	We are expected to provide continuum of services, but we can only use 35% of those services to service youth in care or to prevent youth from coming in care?	See Answer to Question 61
103.	IV.G.3.f.i	43	What does “all licensing actions” mean? Isn’t training a part of licensing?	See Answer to Question 62
104.	IV.H.1	44	Who is responsible for computer systems training (N-FOCUS, MMIS and CHARTS). Is Cornerstones of Care responsible or will staff attend training sessions provided by Nebraska DHHS.	See Answer to Question 63
105.	IV.H	44-46	In addition to mandatory entry into Nebraska DHHS computer systems, can client information and data be entered into the subrecipient’s secure Electronic Health Record? If yes, can information be pulled from N-FOCUS in a data file to be pushed into the secure EHR?	See Answer to Question 64
106.	IV.H.30	46	Can we have our own Outlook email and then send emails encrypted from our system to the	See Answer to Question 65

			State of Nebraska?	
107.	I.3.a	46	<p>“DHHS will withhold a portion of the semi-monthly fixed payments as retainage.” What portion?</p> <p>How is this determined?</p>	See Answer to Question 66
108.	I.3.a.i	46	<p>Recurrence of Substantiated Maltreatment. Our outcome is measured on youth who are or were not court involved?</p> <p>Even if we did not serve that youth or family?</p>	See Answer to Question 67
109.	I.3.a.ii	46	Is the re-entry of any youth that we case managed?	See Answer to Question 68
110.	I.3.b	47	Regarding the following excerpt of this provision: “If the gross amount of the fixed payments plus variable payments made under this section is less than do not exceed amount at the end of each fiscal year of this subaward, the final reconciliation calculations will use a gross retainage equal to the bidder’s proposed percentage of the sum of the fixed payments and variable payments received. The difference between the retainage to date at the end of the term and ten percent of the sum of the fixed payments and variable payments received will be first applied to any sums due DHHS under the end-of-term	See Answer to Question 69

			reconciliation and the balance, if any, will be payable to Subrecipient.” Please provide further explanation of this provision.	
111.	L.	50	Capacity Building allowable costs shall not exceed \$300,000. Expenses incurred prior to July 31. How is reasonable and prudent determined?	See Answer to Question 70
112.	V.A.2.a	51	If we do not currently have a board in Nebraska, will we be given time to create that board? If so, how much time be allowed?	See Answer to Question 71
113.	V.A.d	52	When do we need to identify our office location? Can it be upon award or within a specified time thereafter?	See Answer to Question 72

This addendum will become part of the proposal and should be acknowledged with the Request for Proposal.

