#### RFQ 111765 Z6

Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Nam	ne: <u>Crossroads Mission Avenue</u>
Location: _	1404 E 39th St, Kearney, NE 68847

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

Cost provided must coordinate with the transitional living tier and programs described in Attachment A REV2.

Bidder must provide a cost per client per day.

The provider will not charge a programming fee for clients who do not receive programming and will charge for the lower transitional living / safe and sober living without programming rate.

Upon award of a Provider Term Agreement (contract) the awarded bidder will be provided an invoice template they should use.

HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$30/day)						

TRANSITIONAL LIVING / SAFE AND SOBER LIVING		Initial co	ntract term	Renev	val 1	Rene	wal 2
wit	hout programming	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$65/day)	\$65	\$65	\$70	\$75	\$80	\$85

TRANSITIONAL LIVING with programming		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$90/day)						

#### RFQ 111765 Z6

Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Na	me: <u>Crossroads Mission Avenue</u>
Location: _	702 W 14th St, Hastings, NE 68901

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

Cost provided must coordinate with the transitional living tier and programs described in Attachment A REV2.

Bidder must provide a cost per client per day.

The provider will not charge a programming fee for clients who do not receive programming and will charge for the lower transitional living / safe and sober living without programming rate.

Upon award of a Provider Term Agreement (contract) the awarded bidder will be provided an invoice template they should use.

HALFWAY HOUSE		Initial co	Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	
COST PER CLIENT	PER DAY (Max \$30/day)							

TRANSITIONAL LIVING / SAFE AND SOBER LIVING		Initial co	ntract term	Renev	val 1	Rene	wal 2
wit	hout programming	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$65/day)	\$65	\$65	\$70	\$75	\$80	\$85

TRANSITIONAL LIVING with programming		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$90/day)						

#### RFQ 111765 Z6

Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Nai	me: <u>Crossroads Mission Avenue</u>
Location: _	1910 W 9th St, Grand Island, NE 68801

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

Cost provided must coordinate with the transitional living tier and programs described in Attachment A REV2.

Bidder must provide a cost per client per day.

The provider will not charge a programming fee for clients who do not receive programming and will charge for the lower transitional living / safe and sober living without programming rate.

Upon award of a Provider Term Agreement (contract) the awarded bidder will be provided an invoice template they should use.

HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$30/day)						

TRANSITIONAL LIVING / SAFE AND SOBER LIVING		Initial co	ntract term	Renev	val 1	Rene	wal 2
wit	hout programming	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$65/day)	\$65	\$65	\$70	\$75	\$80	\$85

TRANSITIONAL LIVING with programming		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$90/day)						

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# Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name:	Crossroads Center Inc	
Location: 70	02 W 14th St, Hastings, NE 68901-3006	_

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

Cost provided must coordinate with the transitional living tier and programs described in Attachment A REV1. Bidder must provide a cost per client per day, cost per client per week and cost per client per month.

LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENS	DED HALFWAT HOUSE	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$30/day)						
COST PER CLIENT	PER WEEK (Max \$210/week)						
COST PER CLIENT	PER MONTH (Max \$840/month)						

TRANSITIONAL LIVING with programming		Initial contract term		Renewal 1		Renewal 2	
INANSITION	TRANSITIONAL LIVING With programming		Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$90/day)	90.00	95.00	100.00	105.00	110.00	115.00
COST PER CLIENT	PER WEEK (Max \$630/week)	630.00	665.00	700.00	735.00	770.00	805.00
COST PER CLIENT	PER MONTH (Max \$2520/month)	2520.00	2660.00	2800.00	2940.00	3080.00	3220.00

TRANSITIONAL LIVING / SAFE AND SOBER LIVING		Initial contract term		Renewal 1		Renewal 2	
without programming		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$50/day)						
COST PER CLIENT	PER WEEK (Max \$350/week)						
COST PER CLIENT	PER MONTH (Max \$1400/month)						

#### RFQ 111765 Z6

## Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name: Crossroads Mission Avenue

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Grand Island Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONAL LIVING WITH PROGRAMMING		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Grand Island Regional Office						
COST PER CLIENT	PER DAY	\$90.00	\$90.00				
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONAL LIVING / SAFE AND SOBER		Initial contract term		Renewal 1		Renewal 2	
LIVING WITH	LIVING WITHOUT PROGRAMMING		Year 2	Year 3	Year 4	Year 5	Year 6
Location	Grand Island Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

#### RFQ 111765 Z6

## Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name: Crossroads Mission Avenue

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Hastings Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONAL LIVING WITH PROGRAMMING		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Hastings Regional Office						
COST PER CLIENT	PER DAY	90.00	90.00				
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONAL I	TRANSITIONAL LIVING / SAFE AND SOBER		Initial contract term		Renewal 1		wal 2
LIVING WITHOUT PROGRAMMING		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Hastings Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

#### RFQ 111765 Z6

## Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name: Crossroads Mission Avenue

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Kearney Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONAL LIVING WITH PROGRAMMING		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
Location	Kearney Regional Office						
COST PER CLIENT	PER DAY	90.00	90.00				
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONAL LIVING / SAFE AND SOBER		Initial cor	ntract term	Renewal 1		Renewal 2	
LIVING WITH	HOUT PROGRAMMING	GRAMMING Year 1 Year 2 Year 3 Y		Year 4	Year 5	Year 6	
Location	Kearney Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

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## Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name: Crossroads Mission Avenue

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSEL	D HALFWAT HOUSE	Year 1	1 Year 2 Year 3 Year 4 Year 5 Y		Year 6		
Location	Grand Island Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

TRANSITIONALLI	TRANSITIONAL LIVING WITH PROGRAMMING		Initial contract term		Renewal 1		Renewal 2	
I KANSITIONAL LI	VING WITH PROGRAMMING	Year 1	Year 2	Year 3	Year 4 Year 5 Yea		Year 6	
Location	Grand Island Regional Office							
COST PER CLIENT	PER DAY	\$90.00	\$90.00					
COST PER CLIENT	PER WEEK							
COST PER CLIENT	PER MONTH							

TRANSITIONAL LIVING / SAFE AND SOBER		Initial contract term		Renewal 1		Renewal 2	
LIVING WITH	HOUT PROGRAMMING	Year 1	Year 1 Year 2 Year 3 Year 4 Year 5		Year 6		
Location	Grand Island Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

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## Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name: Crossroads Mission Avenue

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

LICENSED	LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSED	HALFWAT HOUSE	Year 1	Year 2	Year 3	Year 4 Year 5 Year		Year 6	
Location	Hastings Regional Office							
COST PER CLIENT	PER DAY							
COST PER CLIENT	PER WEEK							
COST PER CLIENT	PER MONTH							

TRANSITIONALLI	TRANSITIONAL LIVING WITH PROGRAMMING		Initial contract term		Renewal 1		Renewal 2	
TRANSITIONAL LI	VING WITH PROGRAMMING	Year 1	Year 2	Year 3	Year 4	Year 5 Year		
Location	Hastings Regional Office							
COST PER CLIENT	PER DAY	90.00	90.00					
COST PER CLIENT	PER WEEK							
COST PER CLIENT	PER MONTH							

TRANSITIONAL LIVING / SAFE AND SOBER		Initial cor	ntract term	Renewal 1		Renewal 2	
LIVING WITH	HOUT PROGRAMMING	MMING Year 1 Year 2 Year 3 Year 4 Year		Year 5	Year 6		
Location	Hastings Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						

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All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

LICENSED	LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSED	HALFWAT HOUSE	Year 1 Year 2		Year 3	Year 4 Year 5 Year		Year 6	
Location	Kearney Regional Office							
COST PER CLIENT	PER DAY							
COST PER CLIENT	PER WEEK							
COST PER CLIENT	PER MONTH							

TRANSITIONALLI	TRANSITIONAL LIVING WITH PROGRAMMING		Initial contract term		Renewal 1		Renewal 2	
TRANSITIONAL LI	VING WITH PROGRAMMING	Year 1	Year 2	Year 3	Year 4 Year 5 Year		Year 6	
Location	Kearney Regional Office							
COST PER CLIENT	PER DAY	90.00	90.00					
COST PER CLIENT	PER WEEK							
COST PER CLIENT	PER MONTH							

TRANSITIONAL LIVING / SAFE AND SOBER		Initial cor	ntract term	Renewal 1		Renewal 2	
LIVING WITH	HOUT PROGRAMMING	GRAMMING Year 1 Year 2 Year 3 Y		Year 4	Year 5	Year 6	
Location	Kearney Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						