# Cost Proposal REV1

# RFQ 111765 Z6

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

Bidder Name: Crossroads Center Inc

Location: 702 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	
IRANSITION		Year 1	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	
wit	hout 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)						

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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		wal 2
LICENSEL	D HALFWAT HOUSE	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		wal 2
I KANSITIONAL LI		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	HOUT PROGRAMMING	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 HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSED	HALFWAT HOUSE	Year 1 Year 2 Year 3 Year 4 Year 5		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	
I KANSITIONAL LI		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 LIVING / SAFE AND SOBER		Initial contract term		Renewal 1		Renewal 2	
LIVING WITH	HOUT PROGRAMMING	NG 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						

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

#### Bidder Name: Crossroads Mission Avenue

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LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSED	HALFWAT HOUSE	Year 1 Year 2 Year 3 Year 4 Year 5		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	
I KANSITIONAL LI		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 contract term		Renewal 1		Renewal 2	
LIVING WITH	OUT PROGRAMMING	RAMMING Year 1 Year 2 Year 3 Year 4 Ye		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

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LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSEL	D HALFWAT HOUSE	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	
I KANSITIONAL LI		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 co	ntract term	Renewal 1		Renewal 2	
LIVING WITH	HOUT PROGRAMMING	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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LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSED	HALFWAT HOUSE	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	
I KANSITIONAL LI		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 LIVING / SAFE AND SOBER		Initial cor	Initial contract term		Renewal 1		wal 2
LIVING WITH	HOUT 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						

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LICENSED HALFWAY HOUSE		Initial contract term		Renewal 1		Renewal 2	
LICENSED	HALFWAT HOUSE	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	
I KANSITIONAL LI		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	Initial contract term		Renewal 1		wal 2
LIVING WITH	OUT PROGRAMMING	Year 1	Year 2	Year 3	Year 4	Year 4 Year 5 Yea	
Location	Kearney Regional Office						
COST PER CLIENT	PER DAY						
COST PER CLIENT	PER WEEK						
COST PER CLIENT	PER MONTH						