SOLICITATION ADDENDUM ONE QUESTIONS AND ANSWERS

Date: December 6, 2024

To: All Bidders

From: Dhinesh Santhakumar,

Department of Health and Human Services

RE: Addendum for Warmline RFI

to be opened December 23, 2024, at 2:00 p.m. CST

Questions and Answers

Following are the questions submitted and answers provided for the above-mentioned solicitation. The questions and answers are to be considered as part of the solicitation. It is the responsibility of bidders to check the State Purchasing Bureau website for all addenda or amendments.

Question Number	RFI Section Reference	RFI Page Number	Question	State Response
1.			If this RFI greenlights a solicitation, what is the estimated timeframe for procurement?	The state does not have the information on the estimated timeframe for the procurement and cannot confirm that a Request for Proposal (RFP) will be issued at this time. If the State decides to issue an RFP, the solicitation details would be available on the DAS posting website (https://das.nebraska.gov/materiel/bid-opportunities.html).
				Vendors are highly encouraged regularly monitor the designated posting website for future announcements regarding any potential RFP.

2.			What is the anticipated contract value?	No contract will be awarded as a result of this Request for Information (RFI). The intent of this RFI is to provide information that would assist the state in identifying available solutions and meaningful information for generating appropriate specifications in a subsequent RFP. The state would assess the available spend for the future initiative and determine if any budget amount would be disclosed at the time of issuance.
3.	Section I: Scope of request for Information	Page 1	ALL INFORMATION PERTINENT TO THIS REQUEST FOR INFORMATION CAN BE FOUND ON THE INTERNET AT: http://das.nebraska.gov/materiel/purchasing.html While this link opens via being copied and pasted into this question box, it does not open in the actual RFI notice. Just FYI.	Vendors are to disregard the incorrect link in Section(I) Scope of Request for Information The state acknowledges that this link is not working in page 1 of the RFI. Responders are to use the link provided below: https://das.nebraska.gov/materiel/bid-opportunities.html Or the same link provided in Schedule of Events.
4.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	How would families be referred to the warmline? Would this number be given to them by DHHS if screened out of the DCFS line? What additional ways would referrals be made?	Families would self-refer and/or be referred by community-based partners and/or providers. The number would be publicly advertised and communicated to respective family organizations, providers, schools, medical professionals, law enforcement, etc. Additionally, the number could be provided by DHHS if a family were to call requesting resources or assistance. Families would be referred through various methods. Refer to Section D, Questions 4 and 5, which asks about the planning and structured process.

5.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	Would the warmline be responsible for follow-up with clients to ensure services have been put into place? If so, how long does DHHS see this follow up needing to occur?	Yes, the warmline is intended to play a role in follow-up by ensuring families are connected to the necessary services through a closed-loop referral system. However, ongoing follow-up to confirm service delivery and provide additional assistance, if needed, may be handled by external entities rather than the warmline itself. The length of follow-up would vary based on the family's level of need and engagement. We encourage vendors to review Section III.C for details on the warmline's intended operation and refer to Section (III)(D)(17) for insights into the envisioned follow-up processes.
6.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	Would the state allow a provider to "braid" warmline staffing/services, meaning could a person answering calls for the warmline also answer calls for another helpline/hotline?	Yes, when determining the objectives and developing the specifications the State would give due consideration to allow a provider to "braid" warmline staffing with other helpline or hotline services, Such approach would need to be mindful to not compromise the response times, quality, or outcomes of the Warmline services. To ensure effectiveness, the provider must implement measures such as clear protocols, adequate staffing levels, and regular supervision to maintain the Warmline's intended service standards
7.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	What timeframe will the state give for full implementation of the warmline?	No exact timeline have been ascertained for implementation of the warmline at this time. If the State elects to issue a Request for Proposal (RFP), Based on the nature of this service, and the foreseeable steps necessary for implementation, an estimated timeline would be approximately one (1) year from the date of contract execution. Any established timeline would be noted in a subsequent Request for Proposal (RFP).
8.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	Our understanding is that local community collaboratives will play an instrumental role the warmline. Will community collaboratives be ready for rollout based upon the time frame the state is looking at implementation?	While a critical component, the community collaboratives will not be the only outgoing referral, so there is a need to work with partners as determined in Section D, Questions 4 and 5, to identify resource gaps and needs as a component of the implementation time period. The 23 local community collaboratives under the Bring Up Nebraska initiative will continue to be potential recipients of community response and central navigation referrals. In 2024/2025, intentional investment will be made in these 23 collaboratives to build capacity to prepare and identify navigation systems.

9.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	What efforts is the state taking to ensure a large network of services is available to refer to and meet the needs of the clients who use the warmline?	If the State elects to pursue a Request for Proposal (RFP) for the Warmline services, then the selected vendor will be expected to play a role in identifying gaps and capacity, as well as outreach and awareness of resources. Additionally, these efforts have been ongoing across all DHHS divisions and within communities directly. Local communities have invested in resource gap analysis and capacity building. The current referral infrastructures for supports such as housing, education, and community-based organizations will also continue to receive outgoing referrals depending on the need and target population. The Warmline will continue to use currently established community supports and referrals as well, such as through Find Help, 211, etc.
10.	Section III: Project Description and Scope of Work, A- D	Pages 4-5	What educational requirements will the state mandate a warmline staff have in order to answer calls and refer clients to services?	The State's expectation for minimum qualification/education requirements are for the staff to have specialized expertise and experience in community outreach. This will include, but is not limited to: "Lived experience" with the child and family systems to support families, such as being the recipient of public resources/services to support themselves and/or their children. High School Diploma or GED In addition, the minimum qualifications and/or experience should reflect what a prospective vendor's hiring qualifications include.
11.	Section III: Project Description and Scope of Work, D	Pages 6	Please clarify exactly what you are asking in Q#11, "How would your solution connect families with appropriate education and support services within their communities?" We are reading it in a few different ways.	The intent of Section (III)(D)(11) is to understand how the solution described in your response to Section (III)(D)(1), would ensure that families are connected with education and support services tailored to address their specific needs within their communities.
12.	Section III: Project Description and Scope of Work, D	Pages 6	In Q#10, are you asking that we take calls from callers who do not speak English, or are you asking how we help provide non-English resources to clients who do not speak English? We have translation services, but we do not have control over whether a service we refer to has translation services. Please provide more detail.	The state is asking what systems/processes you have in place to provide information in non-English form. The state's expectation is not for Warmline to have control over the translation services within the referral source-ideally; the Warmline database would have information to advise what non-English languages are provided with each referral source.

N/A	N/A	Does the state have an estimate on the total	The state has Estimated that the total project volume of 20,000 calls
		projected volume of clients who would be calling the warmline and requesting services? This is needed in order to adequately create a plan.	annually with seasonal increases and decreases.
N/A	N/A	The RFI is silent regarding DHHS would want a rough order of magnitude for how much it would cost for the identified solution. Should we assume that no estimated cost should be provided?	The state is not seeking pricing information as a part of this Request for Information (RFI); therefore, no estimated cost should be provided as a part of the response.
Questions 15 and 16	Page 7	Will you provide additional clarity on the statement, "appropriate confidentiality measures."	Appropriate confidentiality measures that comply with all applicable statutes and regulations, current and as amended, including but not limited to HIPAA.
Questions 14 and 17	Page 7	These questions seem to be asking for the same information, is there any clarification in Process or Procedure?	The State has noted that there is duplicate questions. Respondents are to disregard question 14 of Section (III)(D) and provide a response only to question 17 Section (III)(D).
III. C.	Page 5	Will the third-party Warmline operator only manage call intake and referrals, or are they also responsible for coordinating service delivery and follow-ups?	As a requirement of a closed-loop system, the Warmline would need to develop a process to ensure the family was connected to either ongoing navigation or warm transfer to a vendor to provide the needed support. The Warmline vendor would not be required to coordinate ongoing service delivery.
			Please also note the response to question 5 of this Q&A addendum
III. C.	Page 5	Will the State define navigation services?	In this context navigation Services would be defined as identifying services appropriate to the family's needs and ensuring a pathway to access.
III. C.	Page 5	Will the Warmline operator choose which closed-loop referral technology to utilize, or does the State have a preferred solution?	The state does not have a preferred solution for this requirement and is open to suggestions from responders.
III. C.	Page5	Will the Warmline need to integrate with specific databases or platforms?	No, The state does not have a specific database for Warmline and open to suggested solutions from responders. The suggested database or platforms must be able to coordinate with other referral entities or state/local access points such as Find Help, local referral networks, etc.
	N/A Questions 15 and 16 Questions 14 and 17 III. C.	N/A N/A Questions 15 and 16 Questions 14 and 17 III. C. Page 5 III. C. Page 5	projected volume of clients who would be calling the warmline and requesting services? This is needed in order to adequately create a plan. N/A N/A The RFI is silent regarding DHHS would want a rough order of magnitude for how much it would cost for the identified solution. Should we assume that no estimated cost should be provided? Questions 15 and 16 Page 7 Will you provide additional clarity on the statement, "appropriate confidentiality measures." Questions 14 and 17 Page 7 These questions seem to be asking for the same information, is there any clarification in Process or Procedure? III. C. Page 5 Will the third-party Warmline operator only manage call intake and referrals, or are they also responsible for coordinating service delivery and follow-ups? III. C. Page 5 Will the State define navigation services? III. C. Page 5 Will the Warmline operator choose which closed-loop referral technology to utilize, or does the State have a preferred solution? III. C. Page 5 Will the Warmline need to integrate with specific

21.	Question 20	Page 7	Will the State provide standardized performance metrics, or are respondents expected to define their own evaluation metrics?	No, The state is not providing any standardized performance metrics at the time. However, If the state decides to pursue a Request for Proposal (RFP) for the Warmline, the solutions from the responders for the performance and/or evaluation metrics will be taken into consideration.
22.	II. B.	Page 2	What is the anticipated timeline for implementing the Warmline?	Please refer to the Question 7 of this Q&A Addendum
23.	II. B.	Page 2	If an RFP is to be released, what is the anticipated timeline for issuing an RFP?	Refer To Question 1 of this Q&A Addendum
24.	Question 1	Page 6	Will the State define "holistic solution" or add additional clarity to what it means.	A holistic solution is one that considers the entire system or problem, rather than just focusing on individual parts. This approach aims to create long-lasting and sustainable solutions by considering the interconnectedness of different elements.
25.	Question 16	Page 7	What criteria define "candidacy" under FFPSA in Nebraska?	https://dhhs.ne.gov/Documents/NE%20FFPSA%205%20Year%20Plan.pdf Please see page 16 for the currently approved FFPSA candidacy definitions. Additionally, Nebraska is submitting a new plan for approval to expand candidacy to include community-based families without CFS system entry. Before implementation, ACF will need to approve the expansion of this candidacy definition.

26.	Question 16	Page 7	What evidence-based practices are envisioned to support this initiative?	Currently Evidence Based Practices implemented and included in the Nebraska IV-E Prevention plan include Healthy Families America, Parents as Teachers, and Family Centered Treatment. Nebraska is also including additional EBP's in the new FFPSA IV-E Prevention Plan that will require ACF approval before implementation. These include Family Spirit, Family Check In and Familias Unidas. Programs must be listed on the IV-E Prevention Clearinghouse (https://preventionservices.acf.hhs.gov/) to be considered as future additions.
27.	III. B.	Page 5	What are the projected call volumes and referral rates for the Warmline?	Please Refer to Question 13 of this Q&A Addendum
28.	Question 15	Page 7	Are additional legislative or policy actions required to authorize and/or support the establishment, operation and funding of the Warmline?	Additional legislation and/or policy actions will help support the implementation of a Warmline and Community Pathway.

This addendum will be incorporated into the solicitation.