

Request for Quotes – Services

Office of Procurement and Grants

The following is a Request for Quotes – Services (RFQ). DHHS is hereby requesting interested bidders respond to this RFQ with a written statement of work and deliverables for DHHS' consideration.

This Request for Quotes – Services comprises two parts:

1. **Instructions for Submitting a Bid:** Who is eligible to submit a bid to be awarded a contract, and how and when to submit.
2. **Scope of Work and Minimum Requirements:** DHHS's requested scope of work, along with any requirements.

Summary of Desired Services

This RFQ is being issued by the Division of Children and Family Services (CFS), Protection and Safety. This RFQ seeks qualified Contractors to provide evidence-based programs (EBPs) in compliance with the Family First Prevention Services Act (FFPSA) to children and families residing in all counties and Tribes within the state of Nebraska. Contractors will provide In-Home Parenting Skills services, Substance Use Services and/or Mental Health services. The objectives for this RFQ are focused on:

1. Delivering evidence-based In-Home Parenting skill-based programs for families whose children are at imminent risk of removal from the home of the caretaker;
2. Delivering evidence-based Substance Use programs for families whose children are at imminent risk of removal from the home of the caretaker;
3. Delivering evidence-based Mental Health programs for families whose children are at imminent risk of removal from the home of the caretaker;
4. Implementing evidence-based models to the child welfare service array as set forth by the Federal Prevention Clearinghouse; and,
5. Integrating a trauma informed, family-focused and family-driven approach that builds protective factors in families.

Authority to Issue Request for Quotes

DHHS has the authority to issue this RFQ under its authority to procure contracts exempt under Neb. Rev. Stat. § 73-507(2)(e) for direct services to an individual.

1. Instructions for Submitting a Bid

Eligibility to Apply

The following are minimum requirements for any contractor wishing to bid on these services. If a contractor does not meet or is not able to meet the eligibility requirements set forth below, the contractor should not submit a bid. Any bids from an ineligible contractor will be rejected by DHHS.

To be eligible to apply for this RFQ, a contractor must:

1. Contractors must be located within Nebraska with Nebraska required licensure as required by the evidence-based program in accordance with the evidence-based training identified in the Federal Clearinghouse. This information can be found on their website located at: <https://preventionservices.acf.hhs.gov>.
2. Contractors must be trained to program model fidelity as required by the EBP model developer and in accordance with the EBP training identified in the Federal Clearinghouse prior to providing services. This information can be found on their website located at: <https://preventionservices.acf.hhs.gov>.
3. Contractors must indicate what counties they intend to provide the EBP.

Proposal Instructions

Bidders must respond by the time indicated, unless this RFQ is open on a continuous basis. Bidders may respond on any template provided by DHHS or on their own paper, provided the response contains identified deliverables and is sent to the identified contact, below. **All bidders must include an email point of contact for bid submission with their bid.**

Questions

Questions on the RFQ must be sent, via email only, to the Point of Contact, identified below. DHHS will respond to questions before responses are due. DHHS may post questions and responses, in its discretion.

Review

DHHS will review responses and decide whether to award a contract for services, and whom to award the contract. In negotiations with the selected vendor, DHHS may accept the statement of work and deliverables as-is or may request changes from the vendor. A final statement of work and deliverables will be subject to DHHS standard terms and conditions for services contracts, a copy of which is available here:

<https://dhhs.ne.gov/Grants%20and%20Contract%20Opportunity%20Docs/ADDENDUM%20A%20-%20DHHS%20General%20Terms%20-%20Services%20Contracts.pdf>

Please note that additional contract terms may be needed, such as a business associate agreement, or insurance, depending on the services provided. Those may be negotiated with the selected vendor.

Format for Submission

Statements of work and deliverables must be sent in a format that allows for redlining or changes, such as Microsoft Word (not in PDF form, although a PDF may be submitted along with an editable format).

Addenda

DHHS may post addenda to this RFQ if any further information or clarification is necessary. Addenda will be posted on the DHHS Contract Opportunities webpage. No other notification will be provided to any entity.

Failure to Follow Stipulations

Failure to follow anything in this Request for Quote Process and Proposal Instructions, may be the basis for disqualification or rejection of any proposal. Failure to submit a timely response will result in DHHS rejecting a bid, except that DHHS has discretion in allowing a bid submitted but not received by DHHS until a short time (no more than a few minutes) after the stated deadline.

Protests or Grievances

This RFQ process is **not** subject to the DHHS Grievance/Protest Procedures for Vendors. Concerns, however, about the process after award may be sent to DHHS.Procurement@nebraska.gov.

Award Decision

DHHS will post an award decision on its contract opportunities website, available at DHHS.ne.gov. Bidders will not be notified by email.

Responses Due By: Continuous. For purposes of entering into a contract as soon possible, the responses are due by December 15, 2022.	Responses Due to: Jamie Kramer Jamie.kramer@nebraska.gov Michaela Hirschman Michaela.hirschman@nebraska.gov
Point of Contact for any Questions: Jamie Kramer or Michaela Hirschman	Additional Procurement Point of Contact: DHHS.rfpquestions@nebraska.gov

2. Scope of Work and Minimum Requirements

Term

Any contract resulting from this RFQ may start as soon as the contract is executed and end 09/30/2023. The contract may be renewed for one (1) additional one (1) year period. The State reserves the right to extend the period of this contract beyond the termination date when mutually agreeable to the Parties.

Description of Work

Review the attached Service Attachment for each identified evidence-based program.

Deliverables

Review the attached Service Attachment for each identified evidence-based program.

Budget

For contractors who intend to submit for Familias Unidas, a budget and budget narrative will need to be submitted for allowable costs in a DHHS approved format. A template for each is provided as an attachment to this RFQ.

Potential Start Up or Training Funds Available

Funding may be available to assist bidders with start-up costs or training associated with the implementation of these services, if they do not yet provide these services, or training of staff to expand service availability. Additional information will be available to bidders who respond to this RFQ.

For contractors who intend to submit for Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Family Centered Treatment (FCT), rates are provided in the attached Service Attachments.

Evaluation Strategy

In accordance with FFPSA, states must include a well-designed and rigorous evaluation strategy for each service they elect to implement, which may include a cross-site evaluation approved by ACF. The Children's Bureau may waive the evaluation requirement for a Well-Supported Practice if the evidence of the effectiveness of the practice is compelling and the state meets the continuous quality improvement requirements identified in section 471(e)(5)(B)(iii)(II) of the Social Security Act with regard to the practice.

Should the EBP not be rated as "well-supported" on the Federal Clearinghouse, the contractor shall participate in a formal and rigorous evaluation, as set forth by FFPSA. The evaluator(s) shall be identified and contracted by DHHS.

- For non-well-supported services, the contractor shall provide a consent form to the program participant, seeking consent for non-identifiable data information of the program participant be provided to the DHHS approved entity conducting the formal and rigorous evaluation.

Virtual Services Models

Where model fidelity can be maintained, HIPAA-compliant telehealth/virtual platforms may be used. Contractors can contact the service model's purveyor to verify if the proposed EBP can be provided via HIPAA-compliant telehealth/virtual platforms and still maintain model fidelity.

Minimum Requirements

In providing the services under this RFQ, a contractor must meet the minimum requirements set forth below. These minimum requirements will be included in the resulting contract for these services. If a bidder is not able to meet these requirements, their bid will be rejected.

1. Requirements as set forth by the Federal Prevention Clearinghouse.
 - The contractor must provide a trauma informed, evidence-based program(s) that meets requirements of the Federal Prevention Clearinghouse.
 - The contractor must provide evidence-based practices in accordance with FFPSA, per <https://www.congress.gov/115/plaws/publ123/PLAW-115publ123.pdf>
 - The contractor must provide evidence-based practices in accordance with the FFPSA that ensures the family voice and choice of each family; and demographic needs, including any culturally specific needs, are met.
 - The contractor must recruit and train a qualified workforce that maintains fidelity to an evidence-based service in accordance with the FFPSA.
 - The contractor must ensure all services requested by DHHS are available to meet the needs of the families involved in Child Welfare.
 - The contractor must review referrals received from CFS to determine availability and appropriateness of the program to meet the child/family needs.
 - The contractor must ensure all staff are trained in trauma-informed care principles and service delivery in accordance with the FFPSA.
 - The contractor must ensure evidence-based programming is provided in a manner consistent with fidelity and outcome measures established by the model service intervention proposed by the contractor in its bid, including individual and group service models. Fidelity and outcome measures can be found on the federal clearinghouse website, located at: preventionservices.acf.hhs.gov

- The contractor must work cooperatively with the family, the DHHS Case Manager assigned to the family, and involved professionals in assisting the family with meeting goals designed to:
 - Prevent or remedy substance use and/or mental health issues that have led to abuse and neglect; and,
 - Increase parent/caregiver protective factors related to the identified safety threats or risk factors; and
 - Reduce the risk of any child in the home from entering foster care.
- The contractor shall bill Medicaid or private insurance for services specified in this RFQ and Service Attachment. Only if Medicaid or private insurance denies payment shall DHHS be obligated to pay under a contract resulting from this RFQ.
- The contractor must collect and report Provider Performance Improvement (PPI) data for Model Fidelity Standards, as applicable, in accordance with the requirements of the designated measure. The data must be reported in a manner and format approved by DHHS. The Contractor will enter data on DHHS's PPI website, as detailed in the Service Attachments, or through a method that is approved by DHHS.
 - The data elements provide high-level insight into the appropriateness of the service referral from the clinician's perspective, as well as provide context data for outcome analysis. This data also provides the ability to analyze case durations and outcomes at case closure, as well as the ability to analyze data specifically by agency and clinician. The contract monitors will be reviewing the data throughout the month, looking for responses requiring prompt communication with the CFSS team or the agency, e.g., inappropriate referral. For example, the CFS contract monitors will look for referrals that are marked as not appropriate (item c above). If the agency marks the referral as not appropriate, the contract monitor will discuss the concerns with the agency and develop a plan for the referral to be addressed by CFSS team. Contract monitors will also review PPI information in regard to information being entered by the agency as it relates to family engagement (item g above) and the family's alignment with the target population (item e above) for the service being provided. In the event an agency makes a selection indicating concern with a case, the contract monitors will help facilitate resolution and provide assistance in order to rectify logged concerns.

DHHS Responsibilities

The following is for the information of the Contractor, to understand DHHS' role in the services to be provided under any contract.

- DHHS will pay the Contractor for services as authorized by DHHS through the NFOCUS system.
- DHHS reserves the right to withhold payment until required reports are received or in the event there is noncompliance with any material requirement of this contract. Material requirements include but are not limited to the Contractor's obligation to maintain insurance at the levels set forth in the agreement.
- DHHS will recover overpayments made to the Contractor, regardless of fault or circumstances, by reducing future payment amounts by fifty percent (50%) until the overpayment debt has been paid in full.
- DHHS will provide contractors with quantitative outcome information derived from a quantitative analysis.
- DHHS will provide contractors with information derived from qualitative case reviews.
- Cases reviewed where safety concerns or case management deficiencies are identified will result in immediate notification to contracted provider leadership and the DHHS Contract Monitoring Unit to ensure proactive corrective action is taken.
- DHHS will measure key outcomes that enables DHHS and contractors to assess safety, permanency, and well-being.
- DHHS will collect, within its own system, the additional data information for further assessment of performance outcomes as detailed in the service attachments
- Prior to referral, DHHS will ensure the family has participated in the decision making of submitting the referral for the service.
- DHHS will refer and collaborate with the contractor in developing and implementing the referral process.
- DHHS will develop and maintain the child's prevention plan.