

COUNTY OF FRESNO

ADDENDUM NUMBER: ONE (1)

RFP NUMBER: 952-5344

16-BED ACUTE INPATIENT PSYCHIATRIC HEALTH FACILITY (PHF)

June 10, 2015

PURCHASING USE
ssj

G:\PUBLIC\RFP\FY 2014-15\952-5344 16-BED ACUTE INPATIENT
PSYCHIATRIC HEALTH FACILITY (PHF)\952-5344 ADD 1.DOC

IMPORTANT: SUBMIT PROPOSAL IN SEALED PACKAGE WITH PROPOSAL NUMBER, CLOSING DATE AND BUYER'S NAME
MARKED CLEARLY ON THE OUTSIDE TO:

COUNTY OF FRESNO, Purchasing
4525 EAST HAMILTON AVENUE, 2nd Floor
FRESNO, CA 93702-4599

CLOSING DATE OF PROPOSAL WILL BE AT 2:00 P.M., ON JULY 8, 2015.

PROPOSALS WILL BE CONSIDERED LATE WHEN THE OFFICIAL PURCHASING TIME CLOCK READS 2:00 P.M.

All proposal information will be available for review after contract award.

Clarification of specifications is to be directed to: **Gary E. Cornuelle, phone (559) 600-7114,**
e-mail gcornuelle@co.fresno.ca.us.

**NOTE THE ATTACHED ADDITIONS, DELETIONS AND/OR CHANGES TO THE REQUIREMENTS OF
REQUEST FOR PROPOSAL NUMBER: 952-5344 AND INCLUDE THEM IN YOUR RESPONSE. PLEASE
SIGN AND RETURN THIS ADDENDUM WITH YOUR PROPOSAL.**

- The new deadline to submit your proposal is July 8, 2015 at 2:00 p.m.

ACKNOWLEDGMENT OF ADDENDUM NUMBER ONE (1) TO RFP 952-5344

COMPANY NAME: _____
(PRINT)

SIGNATURE: _____

NAME & TITLE: _____
(PRINT)

QUESTIONS AND ANSWERS

Q1. Should a thorough response to 16-Bed Acute Inpatient Psychiatric Facility RFP 952-5344 include a reply to each and every item listed on Pages 27-32, Sections I, II, III, IV?

A1. Yes, it is recommended that bidders submit proposals that reply to each and every item as thoroughly as possible.

Q2. On page 23 of the PHF RFP it reads "...term of three (3) years with the option to renew for up to two (2) additional one (1) year periods..."; on page 25 it reads as "...services beginning January 1, 2015 through June 30, 2016 with four 12-month renewals"; and on page 34 it reads as "...an initial six (6) month period and four (4) subsequent twelve (12) month periods...". Should bidders prepare budgets and base operations on terms listed on both page 25 and 34? Also, on page 25 it reads as "...services beginnings January 1, 2016...". Does the contract truly begin at 12:01 am on New Year's Day? Please confirm.

A2. The term of the resulting contract will be a total of 5 ½ twelve (12) month periods (January 1, 2016 thru June 30, 2021) as long as the Contractor's performance is satisfactory after the first 3 ½ twelve (12) month periods (the final two years are dependent on performance). Bidders should prepare and submit cost proposals that coincide with that timeframe. The start date of the resulting contract is January 1, 2016.

Q3. Please clarify the calculation for average length of stay on page 26. The RFP identifies it as 533 total 5,524 length of stay.

A3. The average length of stay is not calculated using the Total Admissions data found on page 26. The average length of stay is calculated using total unique clients served and the average length of stay for each unique client served in the PHF. The Average Length of Stay figures listed on page 26 are accurate based on real data.

Q4. Is anyone excluded from being listed as a reference?

A4. There are no restrictions on who can be listed as references.

Q5. Request clarification on formulary information mentioned on page 30 – a) further define the "open formulary"; and b) define "open" vs. "County" formulary.

A5. The Department operates on an "open" formulary meaning medication can be prescribed as the Contractor determines; however the preference of the County is to utilize the medications listed on the "County" formulary that is included as "Exhibit B" in the RFP for continuity of care consistency with the current medications that are utilized by other outpatient programs within the Department.

Q6. What is a "No Hostage Facility" as listed on page 3?

A6. The PHF has a strict "No Hostage" policy, which means that no client will be allowed to leave the facility because of taking a hostage. Force may be necessary to rescue hostages. This policy will be applied in all cases without regard to sex, age, or status of any hostage.

Q7. Is the PHF required to be Medicare certified and receive Medicare funding? If so, what is the annual amount of funding that comes from Medicare?

A7. The PHF is not required to be Medicare certified. There is no funding that currently comes from Medicare.

Q8. Can the PHF serve patients covered by private insurance and contract with private insurance companies? Which, if any, private insurance companies are currently contracted with the PHF? What are the rates paid?

A8. The preference is that bidders would not propose including contracting with private insurance companies to ensure the access to the Fresno County Medi-Cal beneficiaries. The PHF is not currently contracted with any private insurance companies.

Q9. Can the Contractor contract with other counties to serve out-of-county clients in the PHF? Are other counties contracting with Fresno County for Adult PHF beds?

A9. The PHF is not currently contracted with other counties.

Q10. Please provide clarification on the lease costs of County property.

A10. Contractor will need to enter into a Facility Use Agreement whereby facility charges will be charged to the Contractor and Contractor will include in requests for reimbursement back from the Department.

Q11. Is food preparation done on-site or by a vendor?

A11. The facility is equipped with a fully functioning kitchen.

Q12. Are there start-up funds available?

A12. Implementation with a start-up period and an operational period with costs for each.

Q13. Please clarify costs that are included when calculating "Administrative Cost" and "Employee Benefits" costs in relation to the County's Administrative Policy #5.

A13. The County is currently reviewing the specific costs that are included under the categories of "Administrative Cost" and "Employee Benefits".

A recent interpretation of costs that should be included in Employee Benefits lists the following:

- *Health Insurance*
- *Life Insurance*
- *Retirement*
- *Workers Compensation*
- *Unemployment Insurance*
- *Old Age, Survivors & Disability Insurance (OASDI)*
- *Federal Unemployment Tax Act (FUTA)*
- *Federal Insurance Contributions Act (FICA)/Medicare*
- *Benefit Administration*

Q14. What is the current provisional daily rate for the Fresno County Adult PHF?

A14. \$676 per day

Q15. Can Administrative Day rates be proposed to cover costs when patients no longer meet medical necessity but cannot be immediately placed in longer term facilities (e.g., IMD or State hospital)?

A15. Not in the PHF.

Q16. Please provide clarification on the scoring of the RFP bids/responses. Specifically, what weighting is given to Cost vs. Capability and Qualifications vs. Management Plan, as listed on page 41?

A16. A team of reviewers will be scoring proposals with consideration given to how effectively and comprehensively bidders are able to respond to all aspects of the RFP including descriptions of costs, staffing details, administrative structure/management, and other capabilities & qualifications.

Q17. Are there any Prescription Assistance Programs (PAPs) available for the selected bidder?

A17. The Department has a contract with US Scripts; however the Contractor will be able to utilize other companies for medications needed.

Q18. Should this required document be included in the proposal: a formal written Continuous Quality Improvement action plan to identify measurable objectives toward the achievement of Co-Occurring Disorders capability that will be addressed by the program during the contract period?

A18. Yes, an action plan that describes how the Contractor will achieve capabilities to assist clients with co-occurring disorders (mental health and substance abuse).

Q19. Can for-profit companies earn a profit, and, if so, how should it be budgeted and how will it be earned? Does the 15% limit on Administrative Costs include profit? Can a Fixed Rate model for earning a profit be proposed? Can a Net Negotiated Amount model for earning a profit be proposed?

A19. All bidders are free to include cost proposals in their bids that reflect the funding model they would like to utilize as operators of the PHF.

Q20. What costs should bidders include in their cost proposals to cover expenses of the Recovery 360 Model, including the Reaching Recovery Needs Level Assessment tools? Should bidders include training and/or materials costs related to Recovery 360 in cost proposals?

A20. Bidders should include training expenses in their cost proposals along with a description of their plan to implement the Recovery 360 model. The County will provide the electronic modules for the Recovery 360 Model as well as the Reaching Recovery Needs Level Assessment tools.

Q21. In the RFP, bidders are asked to submit two sets of cost proposals with one set to include costs for security and janitorial services at the County's cost, and another set to include costs for those services by private companies. Can bidders propose an alternative method for security services as well?

A21. At a minimum, bidders should include two sets of cost proposals in accordance with the RFP. Alternative methods for security services may be proposed as well.

Q22. Is the Contractor responsible to pay for furniture and equipment that requires replacement?

A22. The County will be conducting facility upgrades at the PHF; however the costs associated solely with the upgrades will be covered by the County separate from the resulting contract for the operation of the PHF. The Contractor will be responsible for paying for replacement furniture and equipment as it pertains to the operation of the PHF, e.g., furniture for client services,

Q23. On page 29 of the PHF RFP #15 Schedule of Active Therapies; what should be provided here? A monthly calendar of group intervention activities, or a list of the active therapies and short description of each?

A23. Bidders should include both a monthly calendar of planned group intervention activities, and a list of active therapies with a short description of each.

Q24. On page 39 of the PHF RFP Section X.F. it says the following: "Copies of the audited Financial Statements for the last three (3) years for the agency or program that will be providing the service(s) proposed. If audited statements are not available, complied or reviewed statements will be accepted with copies of three years of corresponding federal tax returns. This information is to be provided after the RFP closes, if requested. Do not provide with your proposal."

Does this mean that the audited statements need not be provided with the proposal or that the reviewed statements with corresponding tax returns need not be provided with the proposal? Or that none of these are required with the proposal?

A24. Bidders should not include audited statements or reviewed statements with corresponding federal tax returns with their proposals.

Q25. Resumes are not included in the RFP. Could bidders include some in the Appendix?

A25. Bidders may include staff resumes in their proposals.

Q26. Program outcomes clarification set forth on page 33 of the PHF RFP as it reads "Infrastructure Supports – i.e., cost effectiveness of services". Can clarification be provided about this outcome?

A26. The intent of the outcome on Infrastructure Supports is to evaluate how efficiently a Contractor can deliver services to clients by maximizing available resources.

Q27. The selected vendor shall submit electronic billing for services directly into the County's billing module (Avatar) within ten (10) calendar days from the date services were rendered. Do Contractors bill daily or for the full admission upon discharge? If for the full admission, how do Contractors handle admissions that cross over a month or fiscal year?

A27. Contractors will bill for services at a daily rate as soon as possible after the day services are provided with the final services provided at the end of each month entered in Avatar by the 10th of the following month.

Q28. The selected vendor must submit a certified public expenditure report with each respective monthly invoice. Please provide a sample of the monthly CPE report to be submitted along with the monthly invoice.

A28. The CPE report should include a general ledger taken from the accounting software that the Contractor utilizes for its cost accounting.

Q29. The data for billing must be reconciled by the selected vendor to the monthly invoices submitted for payment. During the bidders conference it was stated that Contractors would submit a monthly cost invoice for reimbursement as is standard. Does this mean Contractors are to also include the Units billed in a specific month? If yes, do Contractors delineate them by payor source?

As there is a 90 day period to process Medicare and third party claims, how are these reconciled to the monthly invoice process as the costs for those units will have occurred up to 90 days prior to Avatar data entry?

A29. The Contractor will not need to report units billed within each month on the monthly cost invoice; however the expectation is that the Contractor shall be able to report how many units are billed each month along with the payor sources for the clients presenting at the PHF each month.

It is not anticipated that there will be Medicare, or other third party, billing for services in the PHF.