

**ADDENDUM #001**

**Solicitation Number:** FDC RFP-17-143

**Solicitation Title:** Nonsecure (Short-Term) Residential Substance Abuse Treatment and Behavioral Health Programming

**Opening Date/Time:** September 19, 2017 at 2:00 p.m., Eastern Time (ET)

**Addendum Number:** 001

**Failure to file a protest within the time prescribed in Section 120.57(3), Florida Statutes, or failure to post the bond or other security required by law within the time allowed for filing a bond shall constitute a waiver of proceedings under Chapter 120, Florida Statutes.**

**Please be advised that the changes below are applicable to the original specifications of the above referenced solicitation.** Added or new language to the RFP is highlighted in yellow, while deleted language has been struck.

This Addendum includes the Department’s answers to written questions received.

This Addendum also includes the following revisions:

**Change No. 1:**  
A change to the Timeline.

**TIMELINE  
FDC RFP-17-143**

<b><u>EVENT</u></b>	<b><u>DUE DATE</u></b>	<b><u>LOCATION</u></b>
Release of RFP	June 28, 2017	Vendor Bid System (VBS): <a href="http://vbs.dms.state.fl.us/vbs/main_menu">http://vbs.dms.state.fl.us/vbs/main_menu</a>
Pre-Proposal Conference (non-mandatory)	July 6, 2017 at 3:00 p.m., Eastern Time	Florida Department of Corrections Bureau of Procurement, Stacey Lynn 501 South Calhoun Street Tallahassee, Florida 32399  Call-in Telephone Number: (888) 670-3525 Participant Code 1603048419
Last day for written inquires to be received by the Department	July 13, 2017 prior to 5:00 p.m., Eastern Time	Submit to: Florida Department of Corrections Bureau of Procurement, Stacey Lynn <a href="mailto:purchasing@fdc.myflorida.com">purchasing@fdc.myflorida.com</a>

Anticipated Posting of written responses to written inquires	July 31, 2017	Vendor Bid System (VBS): <a href="http://vbs.dms.state.fl.us/vbs/main_menu">http://vbs.dms.state.fl.us/vbs/main_menu</a>
Sealed Proposals Due and Opened	<b>September 19, 2017</b> <del>August 15, 2017</del> Must be received prior to 2:00 p.m., Eastern Time	Florida Department of Corrections Bureau of Procurement, Stacey Lynn 501 South Calhoun Street Tallahassee, Florida 32399
Evaluation Team Meeting	<b>September 26, 2017</b> <del>August 22, 2017</del> at 10:00 a.m., Eastern Time	Florida Department of Corrections 501 South Calhoun Street Tallahassee, Florida 32399
Anticipated Posting of Recommended Award	<b>October 30, 2017</b> <del>September 18, 2017</del>	Vendor Bid System (VBS): <a href="http://vbs.dms.state.fl.us/vbs/main_menu">http://vbs.dms.state.fl.us/vbs/main_menu</a>

**Change No. 2:**

A revision to the table in Section 1.2, as indicated below:

Circuit (s)	Mandatory Service Site Location (Counties)	Estimated Number of Contracted Beds	Anticipated Contract Commencement Date
01	Escambia, Santa Rosa, Okaloosa, or Walton	50	6/01/2018
02	Gadsden, Liberty, Franklin, Leon, Wakulla, or Jefferson	57	6/01/2018
03 or 08	Madison, Taylor, Hamilton, Suwannee, Lafayette, Dixie, Columbia, Baker, Union, Bradford, Alachua, Gilchrist, or Levy	32	11/01/2018
05	Marion, Citrus, Hernando, Sumter, or Lake	36	6/01/2018
06	Pasco County, FL (any zip code within Pasco County); or  Pinellas County ( <b>Geographical 2</b> ) located in one of the following zip codes: 33702, 33703, 33704, 33713, 33716, 33755, 33756, 33761, 33762, 33770, 33773, 33781, 33782, 34677, 34683, 34685, 34688, 34689, 34698	30	1/01/2018
09	Orange or Osceola	91	6/01/2018
10	Polk, Hardee or Highlands	71	1/01/2018

11	Miami-Dade	53	Upon Award
13	Hillsborough	110	1/01/2017 <b>18</b>
17	Broward	74	1/01/2018
20	Charlotte, Glades, Lee, Hendry, or Collier	37	07/01/2018

**Change No. 3:**

A change to Section 2.5.6, to revise the text below:

**2.9.6** There are three types of discharge from the Program, successful, unsuccessful, or administrative.

a. Successful Discharge

Successful Discharge occurs when an offender meets all of the following criteria:

1. The offender complied with all program requirements;
2. The offender made satisfactory progress towards the goals of their individual treatment plan; and
3. The offender obtained maximum benefit from the program, as determined by their primary counselor and the counselor's clinical supervisor.

b. Unsuccessful Discharge

Unsuccessful Discharge occurs if the discharge is a result of any of the following criteria:

1. The offender committed a violation of program rules;
2. The offender failed to meet the requirements of a successful discharge as outlined above; or
3. The offender had three (3) unexcused absences from scheduled treatment events.

~~The offender's primary counselor, and qualified clinical supervisor, must make the decision to discharge an offender unsuccessfully and that decision must be based on clinical findings. The supporting rationale shall be documented in the offender's clinical file.~~

**A decision to discharge an offender unsuccessfully must be clinically based, in accordance with the Vendor's Department approved policy and be approved by the Qualified Professional responsible for supervising the clinical services of the individual.**

c. Administrative Discharge

An administrative discharge implies neither success nor failure in the program. Some of the reasons for which an offender might be administratively discharged from the program include, but are not limited to:

1. A medical or mental health condition which prohibits an offender from participation in the program;
2. A clinical determination that the offender is not in need of services;
3. Expiration of the offender's sentence;
4. Death of the offender; or
5. Other approved reasons outside of the control of the offender or program and unrelated to program compliance.

**Change No. 4:**

A change to Section 2.8.2, to revise the text below:

**2.8.2 Risk and Needs Assessment**

~~The Vendor shall conduct a Risk and Needs Assessment, utilizing a validated Risk and Needs Assessment tool or utilizing the Department's Risk Needs Assessment results. This Risk and Needs Assessment should be used to determine the criminogenic needs that will be addressed throughout the treatment process. The results of the Risk and Needs Assessment should be incorporated into the Psychosocial Evaluation and the Individual Treatment Plan.~~

The Vendor shall incorporate a risk and needs assessment into their psychosocial assessment. This assessment component should be used to determine the criminogenic needs that will be addressed throughout the treatment process. The identified criminogenic needs shall be incorporated into the Individualized Treatment Plan, in conjunction with any other needs identified by the psychosocial assessment. The Vendor shall utilize the results of the Department's Risk and Needs Assessment, when available, in lieu of any tool they are currently utilizing.

**Change No. 5:**

A change to Section 2.9.6, to revise the text below:

**2.9.6 Co-occurring Disorder Overlaying Services**

Vendor(s) that propose co-occurring overlay services in this RFP shall develop and implement operational procedures for serving or arranging services, for persons with co-occurring substance use and mental health disorders. These procedures shall be approved by the Department within 10 days of execution of any Contract resulting from this RFP. The operational procedure shall reflect how Illness Management and Recovery (IRM) evidenced-based practices and principles, or approved alternative, are utilized in providing services. The procedure shall also include the frequency and type of co-occurring overlay services. The Vendor shall utilize the IRM evidenced-based principles in addressing co-occurring disorder needs, any deviation must be approved in advanced by the Department. IRM resources can be accessed by utilizing the following:

<http://store.samhsa.gov/product/Illness-Management-and-Recovery-Evidence-Based-Practices-EBP-KIT/SMA09-4463>

Vendor(s) that propose co-occurring overlay services must provide the following, to approved offenders, related to co-occurring disorder overlay services:

1. A psychiatric evaluation, diagnosis, and ongoing medication management by a Licensed Psychiatrist, other medical practitioner licensed under Chapter 458, F.S. or Chapter 459, F.S., who has at least two (2) years' experience in the diagnosis and treatment of mental and nervous disorders, or a Licensed Psychiatric, Advanced Registered Nurse Practitioner (ARNP); ~~for offenders approved for co-occurring overlay services;~~
2. The Licensed Psychiatrist, other medical practitioner licensed under Chapter 458, F.S. or Chapter 459, F.S., who has at least two (2) years' experience in the diagnosis and treatment of mental and nervous disorders, or a Licensed Psychiatric ARNP shall provide monthly medication management, unless less frequently is clinically warranted and should be documented in the clinical chart by the Licensed Psychiatrist or medical practitioner as described above. The Licensed Psychiatrist, or other medical practitioner as described above, shall order any necessary lab testing/blood work;
3. A Clinician licensed in accordance with the requirements set forth in ~~Section Chapters 490 or 491 F.S., or Master Level Mental Health/Social Work Clinician~~ shall provide a minimum of two (2) hours of mental health services, per resident, per week to include: one (1) hour of individual counseling and one (1) hour of mental health group counseling. Additionally, they will provide case-management services and liaison between the substance abuse programming team and medication management with the Psychiatrist. These services are in addition to the counseling hour requirements for the nonsecure (short-term) program;
4. An individualized treatment plan that reflects their mental health needs and services for approved offenders;
5. The purchase and administration of psychotherapeutic medications for stabilization of mental disorder symptoms, including medications to treat any side effects; and
6. Laboratory testing/blood work to ensure that offender's prescribed psychotherapeutic medications are appropriately and properly managed regarding the type, dosage, and frequency of administration. The Vendor may utilize any public or subsidized funding available, as well as agreements with pharmaceutical companies, laboratories, health departments, or other county/state/federal resources. The offender will not be responsible for payment of psychotherapeutic medications or testing/blood work, unless they have insurance which covers the total cost.

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Responses to Written Questions  
 FDC RFP-17-143  
 Nonsecure (Short-Term) Residential Substance Abuse Treatment and Behavioral Health Programming

Question Number	Question	Answer
1	Are these new beds or current beds to be reissued?	These are current beds.
2	Please provide a list of current contractors for the beds being issued in this RFP and how many contract beds for each site?	Please see Exhibit I of this Addendum.
3	We have a contract #2844 for Circuit 4 and 8 for 52 beds until December 2018 with renewal option years available, are the 32 beds listed in the RFP in Circuit 3 and 8 in addition too [sic] our current contracted beds?	No, they are not in addition to the current beds in Contract C2844.
4	How much money is available under this contract for Florida, for Miami Dade County?	There is approximately \$415,145.00 available for the Miami-Dade service site location. This could increase or decrease based on need and responses to this RFP.
5	Can we accept food stamps from clients to offset the program costs?	The Food Stamp Program is administered through the Florida Department of Children and Families (DCF). Vendors would be required to abide by DCF guidelines.
6	RFP says we cannot have convicted felons on staff. Can this be waived? Would a DCF exemption suffice?	The Department will have to review and approve the DCF exemption, and it will be on a case by case basis.
7	Are subsistence payments in addition to grant dollars?	Subsistence payments are in addition to the State funds for contracted services.
8	Is public funding through a hospital and/or private pharmaceutical company funding for indigent patients/clients medication acceptable as payment for medication under section 2.9.6 part 5 of the application?	Yes, however the client shall not be held responsible for any co-payment if such a requirement exists.
9	The RFP indicates that offenders who are placed on a Pre-Trial [sic] Release Agreement can now participate in a short term residential treatment program. Will the DC5-404 remain the appropriate referral form that indicates funding for residential treatment and will these offenders be required to complete aftercare as usually instructed by the order of supervision and modification?	Yes, the DC5-404 will remain the appropriate referral form. The offender will be required to complete the terms of their Pre-Trial Release Agreement. If aftercare is not required by the terms of the Pre-Trial Release Agreement, it should minimally be recommended and a referral made.

Question Number	Question	Answer
10	2.5.6 section B of the RFP indicates that the primary counselor and the qualified clinical supervisor must make the decision to discharge a resident unsuccessfully. Do the clinical team and director have any input in this decision?	Section 2.5.6 has been revised. Please see change No. 3 of this Addendum.
11	Section 2.9.3.1. Will the provider have an opportunity to present other evidence based programing [sic] for the Department's consideration, and if so, at what point and to whom should the alternate program be presented for approval?	The Department will not consider alternative programming at this time. The cognitive behavior programming that addresses criminal thinking must be one of the three (3) per Section 2.9.3.1 of this RFP.
12	Section 2.19 / Section 4.20. Please clarify if client records and other contract documentation will be retained for 5 or 7 yrs.	General Contract records require retention for five (5) years. However, medical and/or financial data and documents has a longer retention period. Section 2.19 of the RFP states "Unless a greater retention period is required by State or federal law," and in this case, Section 4.20 denotes that longer required period.
13	Section 3.6.3.3. Please clarify who can be used as a corporate reference. Can DOC employees be used as a reference?	No, Department employees cannot be used as a reference for Contracts to be executed with the Department.
14	Section 3.24. Please clarify the requirement for electronically submitted W-9 forms. This company does have the form on file but should it now be electronically filed?	<p>The link provided in Section 3.24 will provide information on the requirements for electronically submitting W-9 forms. <a href="https://flvendor.myfloridacfo.com">https://flvendor.myfloridacfo.com</a></p> <p>The form's completion is not required until Contract execution.</p>
15	Section 4.18 of the RFP concerning PREA. Are the facilities required to follow the PREA policies and standard by implementing policy that conforms to said standards, or is each facility required to become PREA certified?	<p>Yes, Vendors are required to implement policies that conform with the Department's policies and procedures that relate to PREA. Vendor facilities are not required to become PREA certified.</p> <p>Vendors must ensure facilities comply with the Prison Rape Elimination Act (PREA) requirements in accordance with Federal Rule 28 C.F.R. Part 115, and Department policies and procedures related to PREA.</p>

Question Number	Question	Answer
16	<p>Included under this section (Therapeutic Activities), #4 states Vocational Training and #5 states Educational support, such as GED or basic literacy instruction will be included in those therapeutic activities service delivery. In accordance with section C of attachment XXI, Educational and Vocational Training) it states that they can be provided on and off-site during the ERC phase with the prior approval of the contract manager/designee and the supervising probation officer.</p> <p>Question: Can the delivery of educational/literacy services and vocational services both be referred out and for those educational and vocational services provided in-house, can they be delivered through computer based programs, or do they have to be instructor lead if provided in-house?</p>	<p>Yes, the delivery of educational/literacy and vocational services may be referred out during the ERC phase with prior approval of the Department's Contract Manager, or designee, and the Supervising Probation Officer.</p> <p>Yes, in-house educational and vocational services may be delivered through computer-based programs. These services are not required to be instructor lead if provided in-house.</p>
17	<p>Question: Can a Bachelor's Level clinician with 3 years of experience in counseling deliver the minimum required services in section 2.9.6 #3 as long as they are supervised by a licensed mental health counselor or licensed clinical social worker.</p>	<p>No, a Bachelor's Level clinician with 3 years of experience in counseling cannot deliver the minimum required services in Section 2.9.6, #3 even if supervised by a licensed mental health counselor or licensed clinical social worker, as they do not meet the Contract requirements.</p>
18	<p>Within this section, it states the Vendor must provide the following related to co-occurring disorder overlay services:</p> <p>5. The purchase and administration of psychotherapeutic medications for stabilization of mental disorder symptoms, including medications to treat any side effects;</p> <p>Question: Who will be responsible for payment of all medications related to individuals receiving co-occurring treatment?</p>	<p>The Vendor will be responsible for payment of psychotherapeutic medication. The Vendor may utilize any public or subsidized funding available, as well as agreements with pharmaceutical companies, health departments, or other county resources. The offender will not be responsible for payment of psychotherapeutic medications unless they have insurance which covers the total cost.</p>



Question Number	Question	Answer
19	<p>Laboratory testing/blood work to ensure that offender's prescribed psychotherapeutic medications are appropriately and properly managed regarding the type, dosage, and frequency of administration.</p> <p><b>Question-</b>Would the mental health provider prescribe this and who would pay for this bloodwork?</p>	<p>The Vendor will be responsible for payment of any laboratory testing/blood work. The Vendor may utilize any public or subsidized funding available. The offender will not be responsible for payment of any laboratory testing, and/or blood work unless they have insurance with covers the total cost.</p>
20	<p>Qualifications are only indicated for the Primary Counselors as referenced on page 24.</p> <p>Question: Can required qualifications be provided for the following positions (with exception of b. which has been provided within the solicitation) as identified in section 3.6.4.2.1 on page 41 of this RFP:</p> <ul style="list-style-type: none"> <li>a. Qualified Professional/Clinical Supervisor (or equivalent title)</li> <li>b. Primary Counselor</li> <li>c. Management or Supervisory Positions</li> <li>d. Clinical/Program Support/Monitor Positions</li> <li>e. Any other position(s) providing services under this RFP</li> </ul>	<p>The minimum qualifications for a Qualified Professional are defined Florida Statute 397.311(26). The Department has no required qualifications for Management or Supervisory Positions, Clinical/Program Support/Monitor Positions, or any other position(s) that may provide services under this RFP. The Vendor should provide their required qualifications for these positions</p>
21	<p>On page 21 it states "A psychiatric evaluation, diagnosis, and ongoing medication management by a licensed psychiatrist for offenders approved for co-occurring overlay services." Will you allow a state of FL licensed medical professional who has trained in his/her scope of work to perform psychiatric evaluation, diagnosis and medication management? For example, a licensed physician who is board certified in addiction medicine or a psychiatric advance registered nurse practitioner who is under the supervision of a licensed physician?</p>	<p>Yes, Section 2.9.6 has been revised. Please see change No. 5 of this Addendum.</p>

Question Number	Question	Answer
22	On page 21 #5 it states vendors must purchase psychotherapeutic medications for stabilization of mental disorder symptoms and side effects. Are you asking the vendor to pay out of pocket for these medications? If yes, will there be a reimbursement allowed for the cost of the medication purchased for a participant?	Yes, the Vendor will be responsible for payment of psychotherapeutic medication. The Vendor may utilize any public or subsidized funding available, as well as, agreements with pharmaceutical companies, health departments or other county resources. The offender will not be responsible for payment of psychotherapeutic medications unless they have insurance which covers the total cost. There will be no mechanism for reimbursement by the Department for the cost of medication purchased for an offender.
23	Page 6 indicates the estimated number of contracted beds is 110. Is this total participants for the year or will the total participant number estimate be 220 since participants will remain in the bed for approximately six months?	The total estimated participants will be twice the number of contracted beds, if the bed turns over at least once in a year, which is expected/average.
24	If a participant has a co-occurring disorder diagnosis (in addition to the substance use diagnosis) based on a licensed physician evaluation can the offender be served under a co-occurring bed if he/she requires co-occurring therapy services but is not in need of medication?	No, the individual authorized to receive co-occurring overlay services must be in need of medication. Section 2.9.6 of this RFP describes the requirement for ongoing and monthly medication management.
25	Will you rank the proposals by Circuit or if all are ranked regardless of where they propose to provide services?	The Proposals will be evaluated and ranked by mandatory service site location, not by Circuit. Please reference Sections 1.2 and 3.9 of the RFP.

**EXHIBIT I**

**Current Residential Substance Abuse Treatment Service Contracts**

<b>Bureau of Readiness and Community Transition</b>		
<b>Circuit</b>	<b>Contractor Name</b>	<b>Contracted Beds</b>
<b>1</b>	<b>Non-Secure Programs, Inc. (Pensacola)</b>	<b>41</b>
<b>2</b>	<b>Non-Secure Programs, Inc. (Tallahassee)</b>	<b>52</b>
<b>4,8</b>	<b>The Transition House, Inc.</b>	<b>32</b>
<b>5</b>	<b>Non-Secure Programs, Inc. (Ocala)</b>	<b>35</b>
<b>6</b>	<b>Goodwill Industries- Suncoast, Inc.</b>	<b>30</b>
<b>9</b>	<b>Bridges of America - The Orlando Bridge</b>	<b>90</b>
<b>10</b>	<b>Bridges of America - The Polk Bridge</b>	<b>60</b>
<b>11</b>	<b>Banyan Community Health Center, Inc.</b>	<b>16</b>
<b>11</b>	<b>Banyan Community Health Center, Inc.</b>	<b>30</b>
<b>13</b>	<b>DACCO, Inc.</b>	<b>75</b>
<b>13</b>	<b>DACCO, Inc.</b>	<b>5</b>
<b>17</b>	<b>House of Hope, Inc.</b>	<b>68</b>
<b>20</b>	<b>The Salvation Army-Fort Myers</b>	<b>37</b>