

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott
Governor

Celeste Philip, MD, MPH
State Surgeon General

Vision: To be the Healthiest State in the Nation

**Addendum 1
RFP DOH16-028
Local Early Steps Program Offices**

DATE: May 9, 2017
TO: Prospective Vendors
FROM: Diana K. Trahan, Department of Health Purchasing
SUBJECT: Addendum 1 to DOH16-028 Local Early Steps Program Offices

This addendum serves as notice of the following change(s):

Deletions are indicated by “~~strikethrough~~” or reference. Additions, updates or replacements are indicated by underline, reference or **highlighting**.

1. **Section 1.2 Definitions**

Service Area: Counties within the following areas: Western Panhandle, Big Bend, North Central, Northeastern, North Beaches, East **West** Central, Bay Area, Central Florida, Space Coast Gulf Central, Treasure Coast, Southwest Florida, Gold Coast, North Dade and the Southernmost Coast as provided in Exhibit 5.

2. **Section 3.2.2.aa**

Provide a report that includes a list of all third-party denials for services paid with contract funds. Include, insurance name **type**, total cost denied, **and** reason for denial, ~~and follow-up action from the Respondent~~. This report must be submitted to the Contract Manager within 30 days following the end of each month.

3. **Section 3.2.2.cc**

Prepare and submit a quarterly Program Expenditure Report consisting of provider’s line item Budget with actual expenditures and income for each quarter. Submit the report to the Contract Manager within ~~60~~ **45** days from the end of each quarter.

4. **Section 3.2.2.gg**

All of Respondent's employees **providing direct services** must have a Level 2 background screening to work on any portion of this contract. Respondent must propose a detailed staffing plan to fulfill all roles in the organization using **Exhibit 4**.

5. **Section 3.2.2.z**

Prepare a monthly Claims Report that includes information on screenings, evaluations, assessments, services, and date of service delivered to Part C, by community service providers. This information must identify the total number of each type of service paid for each month ~~including any pending claims~~. Submit the report to the Contract Manager within 30 days following the end of the month.

6. Section 4.3.6 Financial Viability Documentation – Deleted in its entirety.

4.3.6 Financial Viability Documentation

a. ~~Financial Audits~~

~~The Respondent shall submit the most recent available and applicable financial documentation that shall include the most recently issued audited financial statement (or if unaudited, reviewed financial statements, in accordance with "Statements on Standards for Accounting and Review Services" issued by the American Institute of Certified Public Accountants(SSARS). If the balance sheet date of the most recent, available audited or reviewed financial statements are earlier than sixteen (16) months from the issue date of the RFP, the Respondent must provide compiled financial statements in accordance with SSARS, with a balance sheet date no earlier than six months from the date of the RFP, along with the most recently issued or reviewed financial statements, with a balance sheet date no earlier than twenty-four (24) months of the issue date of the RFP. The Department shall use its discretion in utilizing one or both statements to determine the given ratios and other financial information. The financial statements shall include the following:~~

- ~~1) The accountant's reports on the financial statements;~~
- ~~2) Balance sheet;~~
- ~~3) Statement of income or activities;~~
- ~~4) Statement of retained earnings (except for non-profit organizations);~~
- ~~5) Statement of cash flows;~~
- ~~6) Notes to financial statements;~~
- ~~7) Any written management letter issued by the auditor to the Respondent's management, its board of directors or the audit committee; and~~
- ~~8) If the Respondent is subject to the Federal Single Audit Act (for programs operating in the State of Florida) or the Florida Single Audit Act, include a copy of the most recently issued: Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements performed in Accordance with Government Auditing Standards; and Report on Compliance with Requirements Applicable to Each Major Program and State Project and on Internal Control over Compliance in Accordance with OMB Circular A-133 and Florida Single Audit Act;~~

OR

~~9) If the Respondent is a sole proprietor or non-corporate entity, the Respondent shall provide financial documentation that is sufficient for a CPA staff to determine the financial ratios, revenues, and equity indicated including applicable financial statements, income tax returns and other documents.~~

~~10) Failure to provide any of the aforementioned financial information may result in response disqualification.~~

~~11) The Department acknowledges that privately held corporations and other business entities are not required by law to have audited financial statements. In the event the Respondent is a privately held corporation or other business entity whose financial statements are audited, such audited statements shall be provided.~~

~~12) The Department also acknowledges that a Respondent may be a wholly-owned subsidiary of another corporation or exist in other business relationships where financial data is consolidated. Financial documentation is requested to assist the Department in determining whether the Respondent has the financial capability of performing the contract to be issued pursuant to this RFP. The Respondent MUST provide financial documentation sufficient to demonstrate such capability including wherever possible, financial information specific to the Respondent itself. At the Department's discretion, the consolidated financial information from a parent company that was submitted in lieu of the Respondent's financial information may be utilized.~~

b. Financial Audit Documentation Criteria

~~A Certified Public Accountant (CPA) will review the Respondent's financial documentation and assess all of the following criteria. At least two (2) of the following four (4) minimum acceptable standards shall be met, one of which must be item c) or d) below:~~

~~1) Current ratio: $\geq 1.0:1$ or (1.0) Computation: $\text{Total current assets} \div \text{total current liabilities}$~~

~~2) Debt to tangible net worth: $\leq 6:1$ Computation: $\text{Total liabilities} \div \text{tangible net worth (net worth minus intangible assets)}$~~

~~3) Minimum existing sales: \geq the maximum annual contract dollar amount for services proposed under this RFP. d) Total equity: $\geq 10\%$ of minimum sales or revenue as determined in c. above.~~

7. Section 4.8.3 Financial Statements

Financial Status Information: Provide information detailing the company's current financial position as well as the financial position of any related companies. The information shall include the audited financial statements of the last three years, in accordance with generally accepted accounting principles or if applicable for a privately held corporation or other business entity that does not have audited financial statements, then financial statements that are reviewed in accordance with Statement on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants shall be provided. ~~Financial Viability Documentation, refer to Section 4.3.6.~~

8. Section 5.8 Commercial General Liability Insurance

Contractor must secure and maintain, at its sole expense and for the duration of the Contract, term insurance policies to protect himself, any subcontractor(s), and the state of Florida. ~~Contractor must save and hold harmless and indemnify the Department against any and all liability, claims, judgments or costs of whatsoever kind or nature for injury to, or death of any person or persons and for loss or damage to any property resulting from the use, service operation, or performance of work under the terms of this Contract, resulting in whole or in part from the negligent acts or omissions by Contractor, his subcontractor, or any of the employees, agents, or representatives of the contractor or subcontractor.~~

- A. Workers' Compensation in accordance with applicable state laws and regulations.
- B. General Liability Insurance covering all operations and services under the Contract in amounts sufficient to protect the Department.
- C. Commercial Automobile Liability Insurance in amounts sufficient to protect the Department.

Certificates of insurance coverage described above must be furnished by the Respondent on request of the Department.

No insurance will be acceptable unless written by a company licensed by the State of Florida Department of Financial Services, Division of Insurance Agent and Agency Services to do business in Florida, where the work is to be performed at the time policy is issued.

9. **Section 6.2 Evaluation Criteria**

Evaluation Criteria	Maximum Points
Executive Summary and Corporate Capability: Organization & Experience, Section 3.1.	
Background and Organization, Section 4.3.3	100
Experience operating programs providing developmental, educational, or mental health services or programs targeting children, families or special needs populations of any age. Section 3.2.7	100
Position Summary of key administrative positions. Section 4.3.3	50
Approach and Methodology, Sections 3.2 and 3.2.2	
Proposed Program Design and Description as based on Scope of Services, Section 3.2	200

Ability to provide program services per task list Section 3.2.2 Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan. Section 3.2.2, s – u.	300
Staffing Plan (Exhibit 4) Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan. Section 3.2.2, s – u.	200
Financial Viability Statements, Section 4.8.3	150
Expenditure Allocation, per Attachment A (Exhibit 2)	100
TOTAL MAXIMUM POINTS POSSIBLE	1,200

10. **Attachment A, 2**

Cost Reimbursement Basis

At least 85 percent of contract funds must be spent on direct client services, which include the following:

At least 85 percent of contract funds must be spent on direct client services, which includes 2.A. – 2.F. below. While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement.

A. Family Involvement:

1) Family Resource Specialist

2) Family Involvement Plan – Each area is allocated a specific amount (see below).

B. Direct Service Personnel (local program office direct service staff)

C. Direct Services (provided by community service providers)

D. Mileage Reimbursement for Direct Services

E. Direct Service Supplies

F. Other services identified on the child’s IFSP such as respite and assistive technology

11. **Attachment A, 3.B**

Family Involvement: A minimum of 1.0 FTE FRS is required for each LES. Each office also receives an allocated amount for family involvement that varies due to the number of children being served by an LES, with no office receiving more than \$5,000. The amount allocated to each LES is based on the average number of children being served monthly. See **Exhibit 1** for average numbers per LES.

Up to 1,000 \$2,500

1,001 – 1,600 \$3,500

1,601 and over \$5,000

Anticipated Third Party Revenue (such as Medicaid and insurance) – must be included on the Expenditure Allocation form (**Exhibit 2**). Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown above in ~~4 and 2~~ **1 A and B and 3A**.

12. Response to written questions and attachment of requested forms in MS Word format.

**Questions and Answers
RFP DOH16-028
Local Early Steps Program Offices**

Q1) Could you please interpret the statement: "Third Party Revenue expended on administrative costs or service coordination is subject to the same requirements and restrictions as those shown above in 1 and 2."?

A1) Attachment A, 3.B. should have read as follows: "Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A." That means that no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in A.1)-A.5).

Q2) Regarding the 3 references, are these entities (companies or individuals) with whom our Early Steps has contracted?

A2) Respondents must provide contact information for three references evidencing three years of experience in the last five years in providing early intervention services to young children or any experience providing services to individuals of any age with developmental delays, disabilities, or special health care needs and their families. A contract is not required, but the information should be included if available.

Q3) Is it possible for me to review the previous bid?

A3) Please use the following link to view the previous bid.

http://www.myflorida.com/apps/vbs/vbs_www.ad_r2.view_ad?advertisement_key_num=105472

Q4) Is it safe to assume the providers have to be Medicaid Providers?

A4) Please refer to 3.2.7 b and c of the RFP which describes the minimum qualifications.

Q5) Acting as a local office, am I correct in saying my practice will be paid by Early Steps?

A5) Please refer to 3.2.8 of the RFP which describes invoicing and payment.

Q6) Will the participating contracting offices be paid by Medicaid?

A6) Contracting offices must bill Medicaid for Medicaid eligible children in accordance with Medicaid guidelines. Local Early Steps (LES) also provide services to children who are not Medicaid eligible. Please refer to section 3.2.8 of the RFP for additional information.

Q7) Does the vendor need to provide services in home?

A7) Please refer to 3.2.2.a. To the extent possible, services are to be provided in the child's natural environment, which is often in the home but may be in the child's day care, in a local park, or other nearby setting. The location where services are provided is the one that is best suited to meet the needs of the child and family.

Q8) On Page 5, under "Service Area:" West Central Early Steps is not identified. There is an East Central identified, but I don't believe they exist.

- A8) Yes, the reference to East Central is in error. There is no East Central LES. It should have read as West Central.**
- Q9) Page 11 3.2.1. Please clarify if the new “At Risk” eligibility category is included in Section a.
- A9) Please refer to Chapter 391 of the Florida Statutes section on Eligibility as referenced in 3.2.1 Eligibility, section a. of the RFP. The policy update to include eligibility for at-risk children is in process. When the Early Steps policies and procedures are revised to include eligibility for at-risk children, LES will be required to comply.**
- Q10) Page 13 3.2.2.k. Please clarify the Service Coordinator ration of no more than 85 children as we understand that this is far above the national recommendation. On what basis was the 85 children per FTE Service Coordinator set?
- A10) The preferred ratio is no more than 85 children; however, if two proposals are submitted for one area that are equal in all areas but the caseload ratio, the respondent submitting a proposal with a lower caseload ratio may receive a higher ranking in that area.**
- Q11) Page 14 3.2.2.p.3 The timeline for processing service provider claims is not reasonable as stated “within 30 calendar days from receipt”. Providers are required in our area to submit their invoices by the 15th day of the month following services and by local contract, we have 45 calendar days to enter all the intervention data, prepare check request and remit payment to the providers. 30 calendar days is not a feasible timeline given the high volume of claims received each month.
- A11) Thank you for your comment; however, that timeline will not be changed.**
- Q12) Page 15 3.2.2.z. Monthly Claims Report – “including any pending claims” is a new component. We do not enter the claims that are pending when we ask the Provider for corrections/missing info. This would be a substantial workload issue for us and we request that this language be reconsidered and deleted.
- A12) It has been determined that pending claims will not be required for inclusion in the monthly claims report at this time.**
- Q13) Page 15 3.2.2.aa Third-party denial report will require a data system enhancement as we currently have no mechanism to collect this data.
- A13) 3.2.2.a.a. should have read “insurance type” instead of “insurance name” (for example, private insurance or Medicaid). It has also been determined that follow up action is not required in this report; however, the LES will be required to follow up on claims denied for correctable reasons and maintain documentation on the local level. Some reports may require information not provided by a standard data system report.**
- Q14) Page 16 3.2.2.gg Please clarify the rationale for all staff being required to have a Level 2 background screening. Currently all our Early Steps staff are Level I screened at the time of hire and then the staff who bill Medicaid have a Level II screening. This seems a much more reasonable approach given our fiscal data team and support staff do not work directly with families.
- A14) This wording was in error. It should have read as follows: “All of Respondent’s employees providing direct services must have a Level 2 background screening...”**
- Q15) Page 17 3.2.5. “Respondent will supply all necessary equipment necessary to perform Contract.” Please clarify as the state office is in the process of ordering lap tops for the Service Coordinators statewide.

A15) As described in Attachment A, contract funds may be used to purchase service coordination personnel supplies (including equipment) and direct service supplies. The respondent awarded a contract is not prohibited from purchasing necessary equipment to carry out the services described in this RFP.

Q16) Page 21 4.3.6.b.3. Please define “minimal existing sales” and “total equity”. Please clarify the reference to “c. above”.

A16) Section 4.3.6 has been deleted in its entirety.

Q17) Page 22 4.8.1. Please clarify “services of a similar size”. This statement certainly excludes any of our external contracted providers so we had thought we would use our large community partners such as the Early Learning Coalition. However, Attachment B asks for “approximate contract value”. We do not have a contract with our large community partners such as the ELC.

A17) Respondents must provide contact information for three references evidencing three years of experience in the last five years in providing early intervention services to young children or any experience providing services to individuals of any age with developmental delays, disabilities, or special health care needs and their families. A contract is not required, but the information should be included if available. If there is no contract in place, please state that and insert the approximate value of services provided.

Q18) Page 22 4.8.2. Please clarify the Statement of Non-Collusion in Attachment C on page 36. Does this refer to collusion with the state program office?

A18) Yes.

Q19) Page 31 Attachment A. 2. Service Coordination/Support are also components included in the 85% as they are also a direct client service. Please clarify that while they are “fixed price”, they are included in the 85% of contract funds.

A19) Correct. While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement.

Q20) Page 32 Attachment A.3.B. “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown above in 1 and 2.” Please confirm our understanding the 1 = Indirect costs and 2 = Dean’s tax on page 31.

A20) As per Attachment A, 3.A. Administrative Costs, no more than 5% of the total contract may be spent on all of the items listed in 3.A. 1) through 5).

Q21) Pg. 10 Section 3.0: Scope of Services 3.1 Background 3rd paragraph and Pg. 16 3.2.2 Task List - ff

Regarding SSIP demonstration site, seeking guidance on whether to include in this RFP the SSIP demonstration site proposal, deliverables and budget. If to include, how does respondent include in this RFP?

A21) The RFP does not require SSIP demonstration sites to include in the RFP response the demonstration site proposal, deliverables, and/or budget.

Q22) Pg.10 Section 3.0: Scope of Services 3.2.1 Eligibility

Is this an error that at-risk category was not included?

A22) Please see the response to Q9.

Q23) Pg. 16 Section 3.2.3 Deliverables d

There is no deliverable associated with d.

A23) This is a formatting error. No information was omitted.

Q24) Pg. 22 Section 4.8 Documentation #4.8.1 and Pg. 34 -35 Attachment B – Reference Form:

If respondent has maintained this contract for a number of years then what other entities should be included on Attachment B? Is this in reference to the actual agencies and/or services provides that respondent has established agreements with to carry out services? Or are these agencies /programs that respondent has built an interagency agreement with? It seems that *Attachment B* falls more in line with a respondent that has never held this type of contract? Please clarify.

A24) Any entities that the respondent has worked with to provide the services described in Attachment B may be used. A contractual or interagency agreement is not required. Please see also the responses to Q17.

Q25) Pg. 31, Attachment A Payment and Budgeting Requirements # 1B:

Seeking clarification regarding Service Coordination Personnel and Service Coordination Support as a fixed price under the Direct Services 85%? Referencing IDEA Part C defines Service Coordination as a direct service (34 CFR Sec. 303.22(a)(1))

A25) While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement.

Q26) Pg. 32, Attachment A Payment and Budgeting Requirements #3B:

Please explain further the 15% to 85% split for the use of third party revenue. Historically third party revenue is utilized prior to contract dollars and put back into the total operational aspects of the program.

A26) Attachment A, 3.B. should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A”.

Q27) Pg. 38, Exhibit 2 – Expenditure Allocation Form:

Please confirm that **Exhibit 2** is all that is required by respondent for submission of the expenditure allocation aspect of this RFP and a budget template with line item detail is not an expectation for this RFP.

A27) Exhibit 2 is the only form required. A budget template with line item detail is not required.

Q28) Pg. 41, Exhibit 4 – Staffing Plan Template:

Due to the collaborative and interdisciplinary nature of early intervention supports and services under Part C of IDEA, most of the required tasks are integrated. For example conducting public awareness activities is a required task that is built into our referral to direct service staff job description. This respondent is seeking clarification from the procurement officer on how to report FTE’s accurately.

A28) It is recommended that in this circumstance, the respondent estimate what percentage of the person or persons’ job duties are spent on public awareness activities. For example, two people might spend 20% each of their total work time on public awareness activities. In the cell in the FTE column, the figure would then show as .4 FTE. If the respondent wishes to indicate the number of people actually handling the job duties, this can be placed in the cell in the Position column after the position titles or description.

- Q29) 3.2.2 Task List, page 14, letter p, #3 states “Process service provider claims within 30 calendar days from receipt”. **Currently, our providers submit their claims by the 7th of each month, the claims are processed by the 17th of each month, and the providers are paid on the 20th of each month. However, if a provider submits their claims late, later the 7th of the month, then those claims are not processed until the next month’s cycle. 30 calendar days from receipt is not a feasible time frame given the high volume of claims received each month in our area if they submit their claims late. This will increase our administrative work for our providers as well as for our local agency. How do you propose this be done?**
- A29) Thank you for your comment; however, that timeline will not be changed.
- Q30) 3.2.2 Task List, page 15, letter z states “Prepare a monthly claims report that includes information on screenings, evaluations, assessments, services, and date of service delivered to Part C, by community providers. This information must identify the total number of each type of service paid for each month including any pending claims. Submit the report to the Contract Manager within 30 days following the end of the month”. **How do you propose doing this? It is not possible to include “pending claims”. Pending claims are not provided to us by community providers, so we would not have this information. We only have the information for what we are processing. This would mean a more manual process and more processing time. This will increase the administrative work for our providers as well as for our local agency.**
- A30) It has been determined that pending claims will not be required for inclusion in the monthly claims report at this time.
- Q31) 3.2.2 Task List, page 15, letter aa. states “Provide a report that includes a list of all third party denials for services paid with contract funds. Include insurance name, total cost denied, reason for denial, and follow up action from the Respondent. This report must be submitted to the Contract Manager within 30 days following the end of each month”. **How do you propose doing this? Capturing this data will be very difficult. The providers would need to send it to us and there is no way to capture this data in the Early Steps data system. Our only option in the data system is “TPIN” and this is asking for insurance name, etc. This may cause us to lose providers, as they already complain about the high level of paperwork that is required. This would mean a more manual process and more processing time. This will increase the administrative work for our providers as well as for our local agency.**
- A31) This was an error. It should have read “insurance type” instead of “insurance name” (for example, private insurance or Medicaid). It has also been determined that follow up action is not required in this report; however, the LES will be required to follow up on claims denied for correctable reasons and maintain documentation on the local level. Some reports may require information not provided by a standard data system report.
- Q32) Section 5: Contract Terms and Conditions, Page 25, Section 5.7 Subcontractors- **If an LES subcontracts with providers (therapists, ITDS, etc.), should we submit a copy of each subcontract with the response to the RFP, or just the contract template?**
- A32) Please refer to 5.7 of the RFP which states: Anticipated subcontract agreements known at the time of Proposal submission and the amount of the subcontract must be identified in the Proposal. If a subcontract has been identified at the time of Proposal submission, a copy of the proposed subcontract must be submitted to the Department.
- Q33) Section 1.2 Definitions – The definition of “proposal” includes reference to a budget narrative although there is no budget narrative called for in the remainder of the RFP. What are the requirements for the budget narrative?

- A33) The budget narrative referred to in the definition is Exhibit 2 of the RFP. No other budget form or narrative is required.**
- Q34) Section 3.2.2 Task List, k.1 – The preferred caseload ratio of no more than 85 children per FTE service coordinator is much higher than optimal. Is there a preferred minimum caseload ratio as well?
- A34) There is no preferred minimum caseload ratio; however, if two proposals are submitted for one area that are equal in all areas but the caseload ratio, the respondent submitting a proposal with a lower caseload ratio may receive a higher ranking in that area.**
- Q35) Section 3.2.2 Task List, y.2 – The monthly report required within 30 days following the end of the month for item y.2 requires the reporting the total cost for “natural environment support fees.” What are the requirements for such fees and how are they to be classified in Attachment A, Payment and Budgeting Requirements page 31 through 33 of the RFP?
- A35) Per Exhibit 6, Early Steps Taxonomy, providers may be reimbursed based on mileage and/or be paid a natural environment support fee. The mileage travel code is TRAVS and the natural environment support fee is under code 99600. Costs for mileage reimbursement and natural environment support should be classified as a Direct Service.**
- Q36) Section 3.2.2 Task List, z and z.aa – Will the monthly reporting requirements for the information required under z and z.aa be available from the UF CMS Early Steps Data System or some other Data System required by the ESSO?
- A36) It has been determined that pending claims (z) will not be required for inclusion in the monthly claims report at this time. Section 3.2.2.aa should have read “insurance type” instead of “insurance name” (for example, private insurance or Medicaid). It has also been determined that follow up action is not required in this report; however, the LES will be required to follow up on claims denied for correctable reasons and maintain documentation on the local level. Some reports may require information not provided by a standard data system report.**
- Q37) Section 3.2.5 Certification, Licenses, Permits, Taxes and Equipment – The last sentence reads “Respondent will supply all necessary equipment to perform Contract.” Please confirm that contract funds cannot be used to purchase any necessary equipment to perform the services required by this RFP.
- A37) As described in Attachment A, contract funds may be used to purchase service coordination personnel supplies (including equipment) and direct service supplies. The respondent awarded a contract is not prohibited from purchasing necessary equipment with contract funds to carry out the services described in this RFP.**
- Q38) Section 3.2.8 Invoicing and Payment – The second paragraph under this section requires that all third party payor funds for services must be spent only on Early Steps services. What is the definition of Early Steps services for purposes of this requirement? Also, Attachment A 3.B the second paragraph implies that Third Party revenue can be spent on administrative costs or service coordination support costs but does not address service coordination personnel costs. For purposes of spending Third Party revenue for Early Steps services, does this include administrative costs, service coordination support costs and service coordination personnel costs?
- A38) Yes, third party revenue can be spent on administrative costs, service coordination support costs, and service coordination personnel costs. Early Steps services are any of**

those described in Attachment A. Third party funds for administrative personnel and expenses cannot exceed 15%.

Q39) Section 4.3.6 Financial Viability Documentation, b. – The minimum four (4) acceptable standards refers to one of the required standards being either item c or d, but the list has items 1-3 and only d. Please clarify that “minimum existing sales: \geq the maximum annual contract dollar amount for services proposed under this RFP” and “total equity: \geq 10% of minimum sales or revenue as determined in c. [i.e. “3”] above” are the minimum standards referred to as c and d?

A39) Please see the response to Q16.

Q40) Section 4.8.1 References – As a current LES program office, are we able to use the State ESSO as a reference?

A40) A respondent may not use the Early Steps State Office as a reference.

Q41) Section 6.2 Evaluation Criteria – “Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan. Section 3.2.2, s-u” is listed under both Ability to Provide Program Services per task list Section 3.2.2 and Staffing Plan (Exhibit 4). Does it belong in both criteria sections and, if not, which one should it be in?

A41) This was an error. The Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan should not have been in both criteria sections. The four plans are being evaluated as part of “Ability to provide program services per task list, Section 3.2.2” (total of 300 points). They will not be evaluated as part of the Staffing Plan. The Staffing Plan (Exhibit 4) is valued at the full 200 points.

Q42) Attachment A, 2 Cost Reimbursement Basis – Are Service Coordination Personnel costs and Service Coordination Support costs excluded from the 85% requirement that “At least 85% of the contract funds must be spent on direct client services”? Does this RFP specifically require that contract funds for Administrative Services (Administrative Personnel and Administrative Expenses); Service Coordination Personnel; and Service Coordination Support costs in total cannot exceed 15% of the Contract Funds?

A42) While service coordination personnel and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement.

Q43) Attachment A, 3.B Budgeting Requirements – In the second paragraph under 3.B, “Third party revenue expended on administration costs or service coordination support is subject to the same requirements and restrictions as those shown above in 1 and 2.” Does the RFP require Third Party Revenue to be split 15% for the total of Administrative Costs and Service Coordination Costs and 85% for Direct Services Costs? Please clarify what specific restrictions, if any, apply to the allocation of Third Party Revenues?

A43) Attachment A, 3.B. should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A”.

Third party revenue can be spent on any service designated in the contract. However, no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in Attachment A, 3.A.1) through A.5).

Q44) Exhibit 2 Expenditure Allocation Form – Under “Number of FTE Service Coordinators,” should the FTE number include Intake Specialists as Service Coordination Personnel?

A44) Yes. Please also refer to Attachment A, 1.B.

Q45) The Staffing Plan Template, Exhibit 4, does not seem to allow for more text than will fit in the boxes on the form. Can the form be modified, or should we include additional information as narrative (text) following the template?

A45) The form may be modified to make the boxes bigger or additional information can be added at the bottom of the template underneath the statement “Additional information related to staffing plan may be added here”.

Q46) This is a suggestion rather than a question, but we would recommend that calls made to people in the references section include a voicemail message, as most people screen their calls based on familiarity with the caller and will not pick up on calls from the state.

A46) Thank you for your comment.

Q47) Section 1.2 Definitions – The definition of “proposal” includes reference to a budget narrative although there is no budget narrative called for in the remainder of the RFP. What are the requirements for the budget narrative?

A47) Please refer to the response to Q33.

Q48) Section 3.1 Background- It is noted that 3 services areas are participating in the SSIP project, since there are no specific expectations noted in the RFP related to SSIP is there an anticipated allocation for the project. If so what is the allocation and operational scope of the project and should it be included in the RFP submission?

A48) The RFP does not require SSIP demonstration sites to include in the RFP response any information related to the allocation or operational scope of the SSIP project.

Q49) Section 3.2.2. Task List, E4 & 5- Is the State Office anticipating any State responsibility, assistance, or standardization in negotiating and maintaining agreements with Medicaid Managed Care Organizations and Private Insurers?

A49) The Early Steps State Office will provide oversight in these matters.

Q50) Section 3.2.2. Task List, P.3- Historically, local programs have been required to process claims within 60 days of receipt and locally we have averaged 45 days. We are struggling to see how this can be done within 30 days without adding additional Administrative Support Staff thus increasing administrative cost.

A50) Thank you for your comment; however, that timeline will not be changed.

Q51) Section 3.2.2 Task List, z and z, a – Will the monthly reporting requirements for the information required under z and z, .aa be available from the UF CMS Early Steps Data System or some other Data System required by the ESSO? The Early Steps Data System does not support the ability to report Pending Claims and reporting of 3rd party denial information. Is the State Office anticipating a Data System upgrade that can be utilized for meeting these requirements?

A51) Regarding pending claims, it has been determined that pending claims will not be required for inclusion in the monthly claims report at this time. Section 3.2.2.aa should have read “insurance type” instead of “insurance name” (for example, private insurance or Medicaid). It has also been determined that follow up action is not required in this report; however, the LES will be required to follow up on claims denied for correctable

reasons and maintain documentation on the local level. Some reports may require information not provided by a standard data system report.

Q52) Section 3.2.3, d Is left blank is this intentional or a mistake.

A52) This is a formatting error. No information was accidentally left off.

Q53) Section 3.2.5 Certification, Licenses, Permits, Taxes and Equipment – The last sentence reads “Respondent will supply all necessary equipment to perform Contract.” Please confirm that contract funds cannot be used to purchase any necessary equipment to perform the services required by this RFP.

A53) As described in Attachment A, contract funds may be used to purchase service coordination personnel supplies (including equipment) and direct service supplies. The respondent awarded a contract is not prohibited from purchasing necessary equipment with contract funds to carry out the services described in this RFP.

Q54) Section 3.2.8 Invoicing and Payment – The second paragraph under this section requires that all third party payor funds for services must be spent only on Early Steps services. What is the definition of Early Steps services for purposes of this requirement? Also, Attachment A 3.B the second paragraph implies that Third Party revenue can be spent on administrative costs or service coordination support costs but does not address service coordination personnel costs. For purposes of spending Third Party revenue for Early Steps services, does this include administrative costs, service coordination support costs and service coordination personnel costs? Please define the types of expenses that can be included in Direct Serve Supplies. Does this include items such as rent, phone expense, office supplies, etc.?

A54) Early Steps services are any of those described in Attachment A.

Q55) Section 4.3.6 Financial Viability Documentation, b. – The minimum four (4) acceptable standards refers to one of the required standards being either item c or d, but the list has items 1-3 and only d. Please clarify that “minimum existing sales: \geq the maximum annual contract dollar amount for services proposed under this RFP” and “total equity: \geq 10% of minimum sales or revenue as determined in c. [i.e. “3”] above” are the minimum standards referred to as c and d?

A55) Please see the response to Q16.

Q56) Section 4.8.1 References – As a current LES program office, are we able to use the State ESSO as a reference?

A56) A respondent may not use the Early Steps State Office as a reference.

Q57) Section 6.2 Evaluation Criteria – “Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan. Section 3.2.2, s-u” is listed under both Ability to Provide Program Services per task list Section 3.2.2 and Staffing Plan (Exhibit 4). Does it belong in both criteria sections and, if not, which one should it be in?

A57) Please see the response to Q41.

Q58) Attachment A, 1B Payment and Budgeting Requirements- Is Service Coordination included in the 85% minimum expenditure of contract funds? Please clarify for 3rd Party Funds also.

A58) While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

In regard to third party revenue, no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in A.1) through A.5).

Q59) Attachment A, 2 Cost Reimbursement Basis – Are Service Coordination Personnel costs and Service Coordination Support costs excluded from the 85% requirement that “At least 85% of the contract funds must be spent on direct client services”? Does this RFP specifically require that contract funds for Administrative Services (Administrative Personnel and Administrative Expenses); Service Coordination Personnel; and Service Coordination Support costs in total cannot exceed 15% of the Contract Funds? IDEA defines Service Coordination as a Direct Service can you clarify how this RFP defines service coordination? If Service Coordination is expected to be included within the 15% Fixed Price, How does the State Office expect to reach a 1/85 case ratio?

A59) While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

Q60) Attachment A, 3.B Budgeting Requirements – In the second paragraph under 3.B, “Third party revenue expended on administration costs or service coordination support is subject to the same requirements and restrictions as those shown above in 1 and 2.” Does the RFP require Third Party Revenue to be split 15% for the total of Administrative Costs and Service Coordination Costs and 85% for Direct Services Costs? Please clarify what specific restrictions, if any, apply to the allocation of Third Party Revenues?

A60) Attachment A, 3.B. should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A”. That means that no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in A.1)-A.5).

Q61) Exhibit 2- Expenditure allocation- Is Exhibit 2, The only required submission as it relates to the budget or is a line item budget required in addition to Exhibit 2?

A61) There is no line item budget required. Exhibit 2 is the only form required as related to the budget.

Q62) RFP requirements- Can you clarify what is meant by minimal in length and if there is a maximum number of pages acceptable for the RFP.

A62) There is no maximum number of pages that is acceptable, but as 4.2 states, the Department discourages lengthy proposals.

Q63) Note: Reference Page 5: “Service Area.” West Central is not identified, but is identified in the Exhibits. East Central is identified in “Service Area,” but not in the Exhibits.

A63) This was an error. Please see the response to Q8.

Q64) # 1. Reference Page 5: (The definition of Proposal) This makes reference to a technical and budget narrative, even though there is not a budget narrative called for in the remainder of the

RFP. Is this required, and if so, what are the requirements of the narrative, and where should it be included.

A64) Please see the response to Q33.

Q65) #2. Reference Page 12: (3.2.2. g.) Can wording be changed TO: “Ensure that all client information that is collected, be entered into the Early Steps database for purposes.....”

A65) Thank you for your comment. 3.2.2.g states that client information is to be collected and entered as specified in 34 CFR 303.701 which instructs States to collect valid and reliable information as needed to report annually on specific indicators.

Q66) # 3. Reference Page 13: (3.2.2.k.1) It is stated that for manageable caseloads, the preferred ratio be no more than 85 children per FTE Service Coordinator. Is there a preferred minimum caseload as well? Prior contracts referenced 65?

A66) Please refer to the response to Q34.

Q67) # 4. Reference Page 14: (s.) For the Public Awareness plan....Can you provide direction on the Format of the plan, content, # of pages, etc

A67) At this time there is no specified format for the plan or a required number of pages.

Q68) # 5 Reference Page 15: (3.2.2.z.) for “pending claims,” can you explain how this would be reported? The data system does not currently capture this information.

A68) It has been determined that pending claims will not be required for inclusion in the monthly claims report at this time.

Q69) # 6 Reference Page 15: (3.2.2.aa.) Where would the “list” be generated from, as the data system does not provide all of the information requested?

A69) 3.2.2.a.a. should have read as “insurance type” instead of “insurance name” (for example, private insurance or Medicaid). It has also been determined that follow up action is not required in this report; however, the LES will be required to follow up on claims denied for correctable reasons and maintain documentation on the local level. Some reports may require information not provided by a standard data system report.

Q70) # 7. Reference Page 15: (3.2.2.aa.) What format/detail would be required for “follow-up action from the Respondent?”

A70) It has been determined that follow up action is not required in this report; however, the LES will be required to follow up on claims denied for correctable reasons and maintain documentation on the local level.

Q71) # 8. Reference Page 16: (cc & dd). Why 2 reports and wouldn't the 4th quarter report precede the Final report if 2 reports are required? The report for the 4th quarter is the same as annual report and the deadline would be within 60 days after the end of the year.

A71) The 4th quarter expenditure report may serve as the final financial report and will be due within 45 days of end of the last quarter.

Q72) # 9. Reference Page 16: (gg.) Is the Level 2 background screening required for administrative staff and the FRS?

**A72) The wording in 3.2.2 gg was in error. It should have read as follows: “All of Respondent’s employees *providing direct services* must have a Level 2 background screening...”
Administrative staff and FRSs do not require a Level II background screening.**

Q73) #10. Reference Page 16: (3.2.3.d) Should this be blank?

A73) Please see the response to Q52.

Q74) #11. Reference Page 17: (3.3.8) The definition of “fixed amount award” can be found in 2 CFR 200.45. In that case actual costs of the subrecipient are not considered and there should not be a return of contract funds as long as all deliverables and benchmarks are met.

A74) There is no 3.3.8 so this response is related to 3.2.8.

2 CFR 200.45 relates to certain services under the federal regulations that may be procured on a Fixed Amount Award or Contracts (aka: type of contracts or Awards). This citation under the Uniform Grant Guidance (2 CFR 200.45) is different from the language used in the FDOH RFP in that, this RFP proposal is a “Cost Reimbursement” of Financial Assistance Agreement which allows providers to recover actual cost for services provided. The correct citation for this definition would be 2 CFR 200.38 (2) under the Uniform Grant Guidance.

The term fixed price that is used in the RFP relates to payment types which govern how providers will gain access to cash or how cash will be distributed to allow services to take place. This RFP allows for 2 types of payments;

- 1. Fixed Payments for the administrative activities and**
- 2. Cost Reimbursement which in this case is also being used as a type of payment for the direct services portion of the Cost Reimbursement agreement.**

Nevertheless, all payments whether fixed payment or actual billings are subject to cost neutral (no loss or profit). This means providers must maintain separate accounting of all funding and any excess must be returned or benefit the FDOH program for which the funding was received.

Q75) #12. Reference Page 19: (4.3.6 a.) For our Financial Viability Documentation we are planning to submit our audited financial statements for FY 2016 (July 1, 2015 – June 30, 2016). However financial status information in 4.8.3 refers to audited financial statements for the last three years. Can you please clarify what else needs to be submitted to meet requirements for Financial Viability Documentation?

A75) Please see the response to Q16.

Q76) #13. Reference Page 29: Duplicate evaluation criteria for public awareness plan...

A76) This was an error. The Public Awareness Plan is being evaluated as part of “Ability to provide program services per task list Section 3.2.2” (total of 300 points). It will not be evaluated as part of the Staffing Plan.

Q77) # 14. Reference Page 31: The 15% / 85% breakdown between administrative costs and direct client services and 5% limit on restriction indirect cost can be met only if third party revenues are not considered contract funds and can be applied to fund the remaining part of administrative expenses of the subrecipient. According to 2 CFR 200.414 a de-minimis or a negotiated indirect rate can be charged on modified total direct costs.

A77) Thank you for your comment.

Q78) #15. Reference Page 32: (B.) For 3rd Party Revenue, can you please clarify how these restrictions are calculated?

- A78) Attachment A, 3.B. should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A”.**
That means that no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in A.1)-A.5).
- Q79) #16. Reference Page 32 (D. 1,3,4,& 5) Are these services limited to just community providers?
- A79) All direct services can be provided by individuals employed by the LES and/or community service providers.**
- Q80) Section 3.2.2 Task List, k.1 – “...the preferred caseload ratio of no more than 85 children per FTE service coordinator.” 85 children is not a preferred caseload ratio, we would like to know where this number came from. It needs to be lower.
- A80) The preferred ratio is no more than 85 children; however, if two proposals are submitted for one area that are equal in all areas but the caseload ratio, the respondent submitting a proposal with a lower caseload ratio may receive a higher ranking in that area.**
- Q81) Section 3.2.2 Task List, z.aa – Will the monthly report listing all third-party denials including all of the parameters listed in this section be available from the UF CMS Early Steps Data System or some other Data System in the future?
- A81) Please see the response to Q13.**
- Q82) Attachment A, 1.B Fixed Price Basis – it is understood that service coordination be a fixed price however need further confirmation that Service Coordination Personnel costs and Service Coordination Support costs is still part of the 85% of the contract funds that are spent on direct client services.
- A82) Please see the response to Q25.**
- Q83) Pg 13, 3.2.2.k.1 Scope of Services Task List- caseload ratios Caseload ratios of 1:85 is very high, and not optimal for case management. Is there a preferred minimum caseload ratio requirement?
- A83) Please see the response to Q34.**
- Q84) Pg 15, 3.2.2.aa Scope of Services Task List- third party denials report Will the monthly reporting requirements for third party denials be available from the UF Data System or other identified system provided by ESSO?
- A84) Please see the response to Q13.**
- Q85) Pg 17, 3.2.5 Certification, Licenses, Permits, Taxes and Equipment It is not clearly stated that equipment costs fall within the budget parameters as supplies that are needed to administer the program.
- A85) Please see the response to Q53.**
- Q86) Pg 17, 3.2.8; Pg 31, Attachment A Invoicing and Payment; Payment and Budgeting Requirements 1- The second paragraph states third party funds must be spent only on Early Steps services, noting to see Attachment A for further explanation. Attachment A instructions do not state that Service Coordination personnel fall under direct services; IDEA considers service coordination as a direct service. Please clarify that Service Coordination (salaries and support

costs) fall under the 85% allocation. 2a- Please clarify (Pg 32, B) states third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions (the 85-15% split). Please clarify if costs and support includes administrative salaries and service coordination salaries under the third party allocation. 2b- Please clarify what specific restriction, if any, apply to the allocation of third party funds.

A86) Attachment A, 3.B should have read as follows: "Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restriction as those shown in sections 1 A and B and section 3.A."

That means that no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in A.1) through A.5).

While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

Q87) Pg 25, 5.8 Commercial General Liability Insurance The RFP states: Contractor must save and hold harmless and indemnify the Department against any and all liability claims, judgements or costs of whatsoever kind or nature for injury to, or death of any person or persons and for loss or damage to any property resulting from the use, service operation, or performance of work under the terms of the Contract, resulting in whole or in part from the negligent acts or omissions by Contractor, his subcontractor, or any of the employees, agents, or representatives of the contractor or subcontractor. 1- The USF Office of General Counsel has reviewed the RFP posting, and commented that this section requests the Contractor to indemnify, which USF cannot agree to, but generally the Standard Contracts we (USF) see from FL DOH at award except (exempt) agencies of the State from indemnification, or reference entities identified in section 768.28(2), Florida Statutes are excluded from this provision. Please confirm this will be done if USF is awarded the Bay Area Local Early Steps program.

A87) See revised Section 5.8 in Addendum 1.

Q88) Pg 31, Attachment A Payment and Budgeting Requirements Please clarify that all direct services can be provided by either individuals employed by the Local Early Steps and community service providers (omitted in D.1,3-5). Please also clarify where the Natural Environment Support Fee (NESF) will fall under- mileage reimbursement of Other EI Services.

A88) All direct services can be provided by individuals employed by the LES and/or community service providers. Costs for mileage reimbursement and natural environment support should be classified as a Direct Service.

Q89) Pg 38, Exhibit 2 Expenditure Allocation Form 1- Assuming the percentages requested are for contract dollars, are we to add a second line to note third party revenues? 2- Do we include Intake Specialists FTEs as Service Coordination Personnel under the Number of FTE Service Coordinators line?

A89) Please do not include third party revenue percentages on Exhibit 2. Anticipated third party revenue dollar amounts and sources should be included in the indicated section. If more than 3 sources of third party revenue are anticipated, additional lines may be added to the form.

Intake Specialists may be included as Service Coordination Personnel for the purposes of determining a total service coordinator number. Please also refer to Attachment A, 1.B.

Q90) Pg 41, Exhibit 4 Staffing Plan Template Is the proposal limited only to FTEs identified in the Staffing Plan Template? Not all contract responsibilities are listed.

A90) Additional information and tasks may be added as necessary.

Q91) Page 10 - 3.1 and Attachment A – “At least 85 percent of contract funds must be spent on direct client services...” – Please clarify if this is 85% of total allocation funding? Ex. Bay Area = \$ 6,077,438

A91) While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

Q92) Or is it 85% of less the fixed price amount? \$ 6,077,438 – monthly fixed price total

A92) Please see the response to Q91.

Q93) Page 10 - 3.1 “...will participate as demonstration sites for the SSIP: ...” Please explain what a demonstration site entails.

A93) Demonstration sites for the SSIP will be working to assist with implementation and evaluation of evidence-based practices in Early Steps that will result in improved social and emotional development of infants and toddlers. Effective practices identified through demonstration projects will later be implemented statewide.

Q94) Page 10 - 3.2 “Respondent will provide services to eligible children directly or procure services from...” Can a respondent propose to do both – employ staff and contract with other community service providers?

A94) Yes, they may do both.

Q95) Page 11 – 3.2.2.a. “Allowable service codes and maximum rates for services can be found in the ES Taxonomy, Exhibit 6.” Please clarify – if a 3rd party payor reimburses less than maximum rate, contractor can bill the difference to Part C funds?

A95) If third party payor is private insurance, the LES may decide to pay the difference with contract funds; however, Medicaid payment is considered payment in full and providers cannot bill for the difference.

Q96) Please confirm if the Exhibit 1 is minimum or maximum # of service coordinators? Conflicting language in these sections and want to clarify.

A96) Exhibit 1 shows the number of service coordinators that each current LES contract requires. This is meant only as a reference because child counts may mean that the service coordinator number is slightly higher or lower in the coming fiscal year.

Q97) Page 13 – 3.2.2.k.1. “Employ a minimum number of service coordinator positions...See Exhibit 1 for reference.”

A97) The minimum number of service coordinator positions will ensure the ratio is no more than 85 children per service coordinator.

Q98) Attachment A – 1.B. “The maximum number of service coordinators....”

A98) Attachment A, 1.B. means that the maximum number of service coordinators the Department will reimburse for will be specified by the Department. The Respondent may choose to pay for other service coordinators with third party revenue or other resources.

Q99) Exhibit 1, 5th column – “Minimum # of Service Coordinators”

A99) Please see the response to Q96. The Respondent may choose to pay for other service coordinators with third party revenue or other resources.

Q100) Page 15 – 3.2.2.u. “including third party revenues, local school district funding, other program funding...”

A100) Thank you for your comment although it is not clear what the question is.

Q101) As a potential new contractor, we will not have these establish funding streams. Should our plan be based on estimates/projections?

A101) Respondents that are not currently providing services as a LES should prepare the annual funding resource plan based on estimates and projections. It would be beneficial for the respondent to indicate the basis on which the estimate and/or projection is being made.

Q102) Can you please provide additional information and/or historical data on public and private insurance funding by region?

A102) This information is not readily available but can be obtained by a public records request made to the Public Records Section publicrecordsrequest@flhealth.gov.

Q103) Since families have the choice to allow Early Steps to access their public or private insurance, can you provide insurance utilization info?

A103) This information is not readily available but can be obtained by a public records request made to the Public Records Section publicrecordsrequest@flhealth.gov.

Q104) Page 15 – 3.2.2.y.2. “The total costs for natural environment support fees.” Please explain what these fees are?

A104) Per Exhibit 6, Early Steps Taxonomy, providers may be paid a natural environment support fee (code 99600). Natural Environments are settings, including those in the home and community, that are natural or normal for the child’s age peers who have no disabilities. Local Early Steps may pay a natural environment support fee to providers who are serving a child face to face in their natural environment. This support fee will be in addition to the payment the provider receives for services to the child.

Q105) Page 17 – 3.2.7.c. “Submit a completed application for enrollment as a Florida Medicaid provider...” Should this be done now during the procurement process or is it allowable to enroll upon award?

A105) The Minimum Qualifications described in 3.2.7 b and c are intended for those respondents that are awarded a contract. The time of enrollment is at the discretion of the respondent.

Q106) Page 31 – Attachment A – 1. B. “Service Coordination Support...” Does Service Coordination Support include costs associated with administrative assistant staff who may help support SC personnel? If not, please clarify where those costs may be charged?

A106) Administrative assistant staff costs should not be charged under Service Coordination Support. Administrative assistant staff costs should be charged under Administrative Personnel.

Q107) Page 31 – Attachment A – As a multi-state provider of Part C services, we have adapted to varying state payment and budget processes. It appears from the information provided, that ratio of fixed price is 15% (admin and service coordination) vs. 85% cost reimbursement (direct services). When applied to the allocation amounts on Exhibit 1, it is unclear how those percentages support administrative and service coordination costs appropriately. We expect that we are misunderstanding the funding/payment methodology. Can you please further clarify and explain this methodology?

A107) Attachment A, 3.B should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restriction as those shown in sections 1 A and B and section 3.A.”

That means that no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, no more than 5% of the total contract amount may be budgeted as indicated in A.1)-A.5).

While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

The allocation amounts shown on Exhibit 1 are meant only as a reference since state and federal funding may vary somewhat from year to year.

Q108) Exhibit 1 – Is it possible to breakout the fixed price funding vs. cost reimbursement funding for the allocation totals?

A108) It is possible to break out this information; however, the allocation amounts shown on Exhibit 1 are meant only as a reference since state and federal funding may vary from year to year. Therefore, this information is not pertinent to this RFP.

Q109) Page 7 – 2.3. Term – start date – a 3-week turnaround from the award notice is not feasible for a potential new vendor. What is the department’s expectation of a contract start date if a new vendor award is made?

A109) As 2.3 states, the contract will begin on August 1, 2017 or the contract execution date, whichever is later. If a new vendor is awarded a contract, it is anticipated there will need to be a transition period.

Q110) **Section 1.2 Definitions:** The definition of “proposal” includes reference to a budget narrative although there is no budget narrative called for in the remainder of the RFP. What are the requirements for the budget narrative?

A110) Please refer to the response to Q33.

Q111) **Section 3.2.2-k-1:** The ITN states that the preferred ratio is no more than 85 children per 1 FTE service coordinator. This is a change from the current 65-1 preferred ratio. This is not considered best practice and the state of Florida’s current requirement is well above the national average to case ratios. The preferred caseload ratio of no more than 85 children per

FTE service coordinator is much higher than optimal. Is there a preferred minimum caseload ratio as well? Please confirm and comment on the rationale for the increase.

A111) Please see the response to Q34.

Q112) Section 3.2.2 aa: Provide a report that includes a list of all third-party denials for services paid with contract funds. Include insurance name, total cost denied, reason for denial, and follow-up action from the Respondent. This report must be submitted to the Contract Manager within 30 days following the end of each month.

This is a new item in the Early Steps contract. At the current time our UF data system cannot produce such a report required in this item. To do so would be a manual process and extremely time consuming. The items that are **NOT captured** in a manner that would print on a UF data report include **the insurance name** and the **follow-up action from the Respondent**. There is not a place to enter this data in the UF data system that would allow a report to be generated within 30 days following the end of the month. Please elaborate or provide recommendations on this expectation.

A112) Please see the response to Q31.

Q113) Section 3.2.2 gg: All of the Respondents' employees must have a Level 2 background screening to work on any portion of this contract.

All of our employees have a Level II background at the point to hire. Does this include employees who are not direct service staff and is there a required frequency for this item?

A113) The wording in section 3.2.2 gg was in error. It should have read as follows: "All of Respondent's employees providing direct services must have a Level 2 background screening..."

Q114) Section 3.2.5: Respondent must pay for all licenses, permits, certificates and taxes required to operate in the State of Florida. Also, Respondent must comply with all applicable federal, state, and local laws, ordinances, codes, regulations, action transmittals, program instructions, and other requirements at no cost to the DOH. Respondent will supply all necessary equipment to perform Contract.

Section 3.2.5 Certification, Licenses, Permits, Taxes and Equipment – The last sentence reads "Respondent will supply all necessary equipment to perform Contract." Please confirm that contract funds cannot be used to purchase any necessary equipment to perform the services required by this RFP.

Also, please define "equipment" in this statement as there should be no cost to DOH.

A114) Please see the response to Q53.

Q115) Section 3.2.8 - Paragraph 2 under Invoicing and Payment: This section refers to Attachment A. Questions for Attachment A:

3. A. 4.: Please confirm that third party funding is used at program discretion, as long as it is spent on Contract approved items.

A115) 3.A.4 refers to Overhead which is an Administrative Cost.

Attachment A, 3.B. should have read as follows: "Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A."

That means that of the third party revenue amount budgeted for administrative costs, no more than 5% of the total contract amount may be budgeted on items shown in A.1) through A.5).

- Q116) **Section 3.2.8 - Paragraph 2 under Invoicing and Payment:** This section refers to Attachment A. **Questions for Attachment A:**
3 D: In 16-17, the contract was followed using the 85% Direct/15% Indirect rule, under the auspices that the 85% Direct Services allowable component includes the Service Coordination line items. And, the 15% would not support Administration and Service Coordination. Please clarify in which percentage component each (Service Coordination personnel and other costs and Administration) would be applied.
- A116) While service coordination personnel and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.**
- Q117) **Section 3.2.8 Invoicing and Payment:** The second paragraph under this section requires that all third party payer funds for services must be spent only on Early Steps services. What is the definition of Early Steps services for purposes of this requirement?
- A117) Early Steps services are any of those described in Attachment A.**
- Q118) **Section 4.3.1 Exhibit 4 - Staffing Plan, Requirements and Tasks:** For this Staffing Plan Chart, how do we add/enter the number of FTEs if 1 position does more than one of the listed duties?
- A118) Please refer to the response to Q28.**
- Q119) **P. 20, Section 4.3.6 – Financial Viability Documentation:** Please confirm that the reference to a “Certified Public Accountant (CPA) will review the Respondent’s financial documentation.....” pertains to the State DOH’s CPA?
- A119) Yes.**
- Q120) **4.8.1 References** - The RFP states that Respondents must provide three entities that the Respondent has provided commodities or services of a similar size and nature of those requested in this solicitation.
Please define references. Can you please be more specific? Should these three entities all be other Local Early Steps Programs that are like sizes, providers, or consumers/clients, or partners? Should they be the same type of entity as the “Respondent” Organization or similar to the Early Steps program? Also, as a current LES program office, are we able to use the State ESSO as a reference?
- A120) Per Attachment B, any entity that can provide evidence of three years of experience as described therein may serve as a reference; however, a respondent may not use the Early Steps State Office as a reference.**
- Q121) **Section 5.9 Performance Measures – Section 287.058 of FL Statutes:** This stated contract requirement pertaining to performance measures does not relate to the current FI Statutes # 287.058, which says:
Abstract: F.S. 287.058 287.058 Contract document.—(1) Every procurement of contractual services in excess of the threshold amount provided in s. 287.017 for CATEGORY TWO, except for the providing of health and mental health services or drugs in the examination, diagnosis, or treatment of sick or injured stat
Please provide clarification. Does this apply to the Continuous Improvement Plan?
- A121) Per 287.058.1(e), Florida Statute, dividing the contract into quantifiable, measurable, and verifiable units of deliverables that must be received and accepted in writing by the**

contract manager before payment. Each deliverable must be directly related to the scope of work and specify a performance measure. As used in this paragraph, the term “performance measure” means the required minimum acceptable level of service to be performed and criteria for evaluating the successful completion of each deliverable.

Q122) Structure: **PP.28-29, Section 6.2: Evaluation Criteria:** “Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan. Section 3.2.2, s-u” is listed under both *Ability to Provide Program Services* per task list Section 3.2.2 and *Staffing Plan* (Exhibit 4). Were these supposed to be indented in each section so that the first box pertained to an ability to provide program services per task list in section 3.2.2 and in the second box, it pertains to Staffing? Do these plans belong in both criteria sections and, if not, which one should they be in?

A122) This was an error. The Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan should not have been in both criteria sections. The four plans are being evaluated as part of “Ability to provide program services per task list Section 3.2.2” (total of 300 points). They will not be evaluated as part of the Staffing Plan. The Staffing Plan (Exhibit 4) is valued at the full 200 points.

Q123) **Exhibit 4 – Staffing Plan:** When reporting on staffing, does this only refer to the staff that works for the Developmental Center/Early Steps Program or do we include the subcontracted staff?

A123) When reporting on staffing, only include staff working directly for the LES. Do not include subcontracted staff.

Q124) **Page 18. 4.2.4.** We have been operating two local early steps programs successfully for more than 5 years. As an agency we have one budget for both programs and one staffing plan. Staff often work on tasks at both programs, and this has resulted in reduced costs and savings to other resources. Last year we were encouraged by our program manager to consider combining the two local programs into one region. The current RFP asks for separate expenditure allocation forms (exhibit 2) and staffing plan (Exhibit 4). As we have operated both programs with a joint budget and staffing plan can we submit just one exhibit 4 and one exhibit 2 to represent both Local Early Steps programs?

A124) No. Section 4.2.4 of the RFP states that a separate Expenditure Allocation form (Exhibit 2) and Staffing Plan form (Exhibit 4) must be submitted for each service area being applied for.

Q125) **Page 11. 3.2.2 e (4 & 5)** 15 local early steps programs negotiating separately with Medicaid Managed care organizations and private insurers will likely result in fragmented non-uniform agreements across the state. In March 2016 on the directors call, ESSO indicated a statewide umbrella agreement could be considered and local programs could build from a statewide agreement. The Florida statutes 391.308 2 (h) defines a role of ESSO in supporting the development of agreements. Negotiations that begin at the state level would be more likely to succeed and would result in uniformity across programs. Could this section be re-written to show the state level involvement in the negotiation process?

A125) Thank you for your comment.

Q126) **Page 14 3.2.2.p.3** The timeline for processing service provider claims is stated “within 30 calendar days from receipt”. Providers are required in our area submit their invoices monthly on the 15th of the month and our local contracts allow us 45 days to enter all the data, and remit

payment to the providers. With the limited admin budget processing the claims individually by hand or entering all data by hand within 30 days to issue payment is not feasible. Can the timeline be returned to 45 days?

A126) Thank you for your comment; however, that timeline will not be changed.

Q127) **Page 15: Z.** We are not sure how to report pending claims mentioned in this section, could you clarify? We record the intervention data with the expected payer for example TPIN when a child has private insurance. If the community provider later submits a valid denial we change the payer to CONTI and use part C funds to pay the claim so we don't identify claims as pending.

A127) It has been determined that pending claims will not be required for inclusion in the monthly claims report at this time.

Q128) **Page 31, Attachment A,** Cost reimbursement Basis shows 85% of contract funds must be spent on Direct client services. Service Coordination is considered a direct service but is not listed in A though F. Should the 85% include service Coordination?

A128) Correct. While service coordination and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement.

Q129) **Page 31, A.2** Many public awareness plan activities have previously been performed at the state level. Moving all these activities to be funded at the local program level will lead to strain on the 15% limit for administration funds, and may lead to public awareness activities and messages being fragmented across the state. Would the state reconsider keeping some public awareness tasks and material development at the state level to provide uniformity?

A129) Thank you for your question. An Early Steps marketing toolkit has been developed to provide uniformity.

Q130) **Page 32 3.B.** "Third Party Revenue is expended on administration costs or service coordination support is subject to the same requirements as those shown above in 1 and 2." Please clarify? Does this imply we have to allocate third party revenue to the program with 15% to administration and 85% to direct services?

A130) Please refer to the response to Q1.

Q131) **Page 41, Exhibit 4. Staffing plan template.** Can we add additional tasks to the staffing plan? Some staff take on multiple tasks or parts of tasks, for example some of our direct service providers are dually enrolled as service coordinators. How should we report the FTE for staff who take on multiple tasks? Will the total number of staff hired to implement the program be limited to the total FTE indicated on the staffing plan?

A131) Additional tasks can be added to the bottom of the staffing plan as necessary. When reporting on a responsibility handled by multiple staff, it is recommended that in this circumstance, the respondent estimate what percentage of the person or persons' job duties are spent on public awareness activities. For example, two people might spend 20% each of their total work time on a specific activity such as public awareness. In the FTE cell, the figure would then show as .4 FTE. If the respondent wishes to indicate the number of people actually handling the job duties, this can be placed in the Position column after the position titles or description.

Q132) Section 3.2.8 Invoicing and Payment: The second paragraph states funds must be identified on LES budget and spent only on Early Steps services. Noted Attachment A within this section reflects Third Party revenue expended on Administrative costs or Service Coordination being subject to same requirements in Attachment A #1 and #2. Need clarification that this includes Salary Dollars where needed within Administrative and Service Coordination. In addition, please define internal accounting system for third party collections. UF Data system can report this information by service date but Quickbooks (accounting system) is not setup that way.

A132) Attachment A, 3.B. should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A.” Third party revenue can be spent on administrative costs, service coordination support costs, and service coordination personnel costs. Early Steps services are any of those described in Attachment A. Third party funds for administrative personnel and expenses cannot exceed 15%.

Q133) Section 4.3.6 b Financial Audit Documentation Criteria: Do not see (4) minimum standards listed. Standard must be on of item c) or d), but do not see all these items listed within this section.

A133) Please see the response to Q16.

Q134) Are there any restrictions on the length of the submission as a whole or for any sections?

A134) Please see the response to Q62.

Q135) Exhibit 2 Expenditure Allocation Form – Under “Number of FTE Service Coordinators,” should the FTE number include Intake Specialists as Service Coordination Personnel?

A135) Yes. Please refer to Attachment A, 1.B.

Q136) Section 1.2 Definitions – The definition of “proposal” includes reference to a budget narrative although there is no budget narrative called for in the remainder of the RFP. What are the requirements for the budget narrative?

A136) Please see the response to Q33.

Q137) Section 3.2.2 Task List, k.1 – The preferred caseload ratio of no more than 85 children per FTE service coordinator is much higher than optimal. Is there a preferred minimum caseload ratio as well? What determination was used to establish 1:85 as a manageable caseload?

A137) Please see the response to Q34.

Q138) For 3.2.2 f. what is the definition of monthly service coordination provision? What are the required activities to meet this other than the number of service coordinators employed?

A138) The service coordinator is responsible for:

- **Coordinating all services required under this part across agency lines;**
- **Serving as the single point of contact for carrying out service coordination activities; and**
- **Implementing the early intervention services identified in the IFSP, including transition services, and coordination with other agencies and persons.**

Please also refer to 3.2.2 e and j for activities to meet requirements for the provision of early intervention services.

Q139) Can the time frame for provider payment (page 14) be increased from 30 to 45 calendar days?

A139) Thank you for your question; however, that timeline will not be changed.

Q140) Page 15 - How are pending claims to be reported?

A140) It has been determined that pending claims will not be required for inclusion in the monthly claims report at this time.

Q141) Section 6.2 Evaluation Criteria – “Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan. Section 3.2.2, s-u” is listed under both Ability to Provide Program Services per task list Section 3.2.2 and Staffing Plan (Exhibit 4). Does it belong in both criteria sections and, if not, which one should it be in?

A141) This was an error. The Public Awareness Plan, Business Continuation Response Plan, Funding Resource Plan and Provider Recruitment Plan should not have been in both criteria sections. The four plans are being evaluated as part of “Ability to provide program services per task list, Section 3.2.2” (total of 300 points). They will not be evaluated as part of the Staffing Plan. The Staffing Plan (Exhibit 4) is valued at the full 200 points.

Q142) Attachment A, 2 Cost Reimbursement Basis – Are Service Coordination Personnel costs and Service Coordination Support costs excluded from the 85% requirement that “At least 85% of the contract funds must be spent on direct client services”? Does this RFP require that contract funds for Administrative Services (Administrative Personnel and Administrative Expenses); Service Coordination Personnel; and Service Coordination Support costs in total cannot exceed 15% of the Contract Funds?

A142) While service coordination personnel and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

Q143) Attachment A, 3.B Budgeting Requirements – Does the RFP require Third Party Revenue to be split 15% for the total of Administrative Costs and Service Coordination Costs and 85% for Direct Services Costs? Please clarify what specific restrictions, if any, apply to the allocation of Third Party Revenues?

A143) Please see the response to Q1.

Q144) For section 3.2.7 b, certain employees and providers are not eligible to enroll in Medicaid. Can we have an exclusionary statement?

A144) An exclusionary statement will not be provided; however, it is understood that employees and/or providers who are not eligible to enroll in Medicaid will not be enrolled as a Medicaid provider.

Q145) The RFP does not state any requirements to include attachments such as:

- Orientation materials
- Outreach materials
- Resumes
- Job descriptions
- Letters of Support

Please confirm that these are not required, and that the only items to be included in the proposal submission are those listed in the RFP pp.18-23.

A145) Correct. The referenced items in your question (orientation materials, outreach materials, etc.) are not required.

Q146) Payment and Budgeting Requirements (Page 31)

Under Cost Reimbursement Basis: Although Service Coordination Personnel and Service Coordinator Support are appropriately listed as Fixed Price Basis, they should also be listed under the 85% of contract funds spent on Direct Services. They are not part of the 15% Administration Costs. Please clarify.

A146) While service coordination personnel and service coordination support are paid on a fixed price basis, they are considered a Direct Service for the purposes of calculating the 85% requirement. Contract funds for Administrative personnel and expenses cannot exceed 15%.

Q147) Task 3.2.2. e 4 and 5

According to statute 391.308 under the section 'DUTIES OF THE DEPARTMENT.—it states that "The department shall assist local program offices to negotiate agreements with Medicaid managed care organizations in the service areas of the local program offices".

Can you provide clarification as to what assistance the Department shall provide to the local Early Steps to negotiate agreements?

A147) As per 391.308 j and k, Florida Statute, each LES must negotiate individual agreements with Medicaid Managed Care organizations and private insurers. The Early Steps State Office provides oversight in these matters.

Q148) Task 3.2.2.k.1

"The preferred ratio is no more than 85 children per FTE service coordinator". This change is counter intuitive to the State's Improvement Plan as well as to the current Demonstrations Projects which are attempting to decrease patient/client ratios down to 50 children per FTE Service Coordinator. By specifying a higher maximum, it makes it difficult to justify the current number of service coordinators per center as well as advocacy for a lower ratio. Why was this number (85) selected? Please comment.

A148) The preferred ratio is no more than 85 children. However, if two proposals are submitted for one area that are equal in all areas but the caseload ratio, the respondent submitting a proposal with a lower caseload ratio may receive a higher ranking in that area.

Regarding the State Systemic Improvement Plan and the current demonstration projects, one of the goals of the State Improvement Plan is to determine the optimal service coordination caseload ratio to result in improved outcomes for children and families.

Q149) Task 3.2.2.P.2.

Is the 120 days a new mandate? Up until now, claims have been paid according to Medicaid guidelines which allows up to 1 year if evidence of ineligibility or refusal to pay (EOB) by Medicaid/Insurance has been provided

A149) 3.2.2.p.2 is not related to claims that have been refused by Medicaid or insurance but is instead related to claims previously rejected by the Respondent. This 120 days limitation will assist with timely payment to community service providers for services provided. Claims that have been denied by a third party payor are referenced in 3.2.2 p.5.

Q150) Task 3.2.2.P.3.

Currently claims are processed within 45 days of receipt- 30 days is unreasonable and impractical. Why was this period shortened?

A150) Thank you for your comment; however, that timeline will not be changed.

Q151) Task 3.2.2.g.g

Does this background check now include all staff- including those who have no client interaction? (ie. Data Technicians, Fiscal Clerks, etc.). This has not been required in the past.

A151) The wording in section 3.2.2 gg was in error. It should have read as follows “All of Respondent’s employees *providing direct services* must have a Level 2 background screening...”

Q152) Section 3.2.3.d. on page 6: is blank. Is this a typo?

A152) Please see the response to Q52.

Q153) Documentation 4.8.1, References:

Can you provide clarification to the statement “Respondents must provide contact information for three entities the Respondent has provided commodities or services of a similar size and nature of those requested in this solicitation”? The statement appears to indicate that the Respondent should have provided commodities or services to the three entities the Respondent is selecting as references. Should this be large agencies like Easter Seals, United Cerebral Palsy, etc. or Community Providers with whom we have contracts.

Additionally, can you clarify the meaning of “Service Dates” and “Approximate Contract Value” on the Attachment B Reference Form?

A153) Respondents must provide contact information for three references evidencing three years of experience in the last five years in providing early intervention services to young children or any experience providing services to individuals of any age with developmental delays, disabilities, or special health care needs and their families. A contract is not required, but the information should be included if available. If there is no contract in place, please state that and insert the approximate value of services provided.

Service dates are the dates in which services were provided or the experience was obtained.

Q154) Attachment A – Budgeting Requirements

Currently the 3rd Party Revenue is not subject to the same requirements/restrictions of the 15/85 rule as in the CMS contract. Please clarify.

A154) Attachment A, 3.B. should have read as follows: “Third party revenue expended on administrative costs or service coordination support is subject to the same requirements and restrictions as those shown in sections 1 A and B and section 3.A.”

That means that no more than 15% of the third party revenue amount budgeted for Service Coordination may be spent on service coordination support and, within administrative costs, and no more than 5% of the total contract amount may be budgeted as indicated in A.1)-A.5).

Addendum 1
RFP DOH16-028
Local Early Steps Program Offices
Addendum Acknowledgement Form

THIS ADDENDUM NOW BECOMES A PART OF THE ORIGINAL RFP.
THE ADDENDUM ACKNOWLEDGEMENT FORM SHALL BE SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE, DATED AND RETURNED WITH THE RFP RESPONSE AS INSTRUCTED IN SECTION 2.5, ADDENDA.

Printed Name

Signature of Authorized Representative

Date

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.