SUPPORTIVE SERVICES PROGRAM REQUEST FOR PROPOSALS
RFP No.: AAA-SSP-1014
QUESTIONS AND ANSWERS AND THE PROPOSER'S CONFERENCE
POSTED: OCTOBER 21, 2009

Q1: May my organization be added to the distribution list for updates to this RFP?

A1: Addenda and updates are sent to potential Proposers who do not have regular access to the internet. If you have regular access to the internet, you are responsible for checking the site for addenda and updates. Please review Section 1.5 of the SSP RFP for more information.

Q2: The required forms on the website are password protected. May we have the password?

A2: It is not normally Community and Senior Services' practice to give our passwords to Proposers. The forms are formatted to allow data entry, if the forms are not protected the forms will not function as designed.

Q3: Please outline the specific steps involved in the protest process.

A3: The details of the protest policy are outlined in Section 1.13, page 13 of the RFP; Section 3.62, page 45; and 3.7 of the RFP, page 47.

Q4: Will the Emergency Preparedness Forum on 11/24/09 go over what specifically we need to have in place to be in compliance with Section 15.3.2 and Section 15.3.3, page 24 of Appendix B, SOW?

A4: The Emergency Preparedness Forum being held on 11/24/09 is not specifically an Area Agency on Aging (AAA) event, but is supported by the Department. There will be generic forms available that may assist you in developing the requirements in Sections 15.3.2 and 15.3.3 of the SOW. These state that a contractor must have a written emergency plan on file describing how services will be maintained during the event of an emergency, and the contractor must maintain a registry of Program participants for emergency purposes.

Q5: Does Section 2.8.7, page 35 of the RFP require a response from the Proposer?

A5: No response is required. This section is included to provide information to the Proposers only.

Q6: Section 2.8.8.1, pages 35 and 36 of the RFP asks for an Organizational Chart and staffing plan. What are you looking for with regards to the staffing plan? We list the staff and their bios, with resumes attached in...but you want something more?

A6: The Proposer must display the required staff stated in the Statement of Work, Section 5.0, Contractor Personnel. Other than that, it is up to each Proposer to determine the contents of its agency's staffing plan.

Q7: Section 2.8.4.4, page 36 of the RFP asks the Proposer to describe how it will ensure that Services are provided only to eligible Clients. What documentation is required to verify eligibility?

A7: Examples include the Universal Intake form, Client identification, etc.

Q8: With the current Integrated Care Management (ICM) providers, there is a provider network that shows the areas covered by the various providers. Sometimes, there are two providers for one service area. Is it safe to assume that with this RFP, we are starting with a clean slate, and providers in any area will be considered for funding?

A8: Yes, that is correct.

Q9: Section 5.4.2, page 15 of Appendix B, SOW states that Case Management staff requires a bachelor's degree. Will consideration be given for grandfathering in staff that may not have the degree, but have many years experience providing Case Management Services?

A9: CSS will entertain waivers on a case-by-case basis with Proposers who are recommended for funding. However, for the purposes of this RFP, Proposers will be scored based on the current educational requirements stated in Section 5.0 of the Statement of Work.

Q10: In terms of Registry in Section 3.2.7, page 11 of the SOW, what is CSS looking for, and what are the parameters for recruiting and screening? What type of screening are we required to do? Is it a prevention process, or are we talking about maintaining a referral listing, or something more intensive?

A10: The SOW does not specify the criteria. Most contractors do their own screening (i.e., criminal background checks) for the registry list because of liability.

Q11: So it sounds like CSS is looking for a list of individual providers?

A11: Basically, it would be a list of providers that would complement the Services provided through the SSP. For example, if your agency chooses to provide Personal Care Services, the list of providers should be comprised of providers that have the ability to lift an individual who may be wheelchair or bed bound.

Q12: Regarding Registry, a Unit of Service is listed as one hour. Is CSS imagining that each referral or each counseling service might take an hour, or should this read, "one contact?"

A12: Registry is one of those Services in the SSP that does not require Client detail. Registry includes preparation time, travel time, and if necessary, maintenance. Registry must be billed in one hour increments, so if your agency spends 20 minutes trying to make a new contact or adding new names, 20 minutes with the background checks and 20 minutes completing the paperwork, that would equal the one hour (unit) of reimbursement.

Q13: Please provide a further description of Registry Services. For example, will only one Contract be awarded for these Services? Is it the intent of the County to have one contractor that will maintain an information and referral registry for all the contractors?

A13: Registry Services, as stated in Section 3.2.7, page 11 of Appendix B, SOW is a Service Category that a Proposer may elect to provide. There is no intent by the County to have only one contractor maintain a Registry list for all SSP contractors.

Q14: Are the Services in the Registry category intended to include only services similar to those provided in the SSP, or is it the intent to include a variety of services such as nutrition and transportation resources? Is the registry to be used only for our organization's Clients, or is it for all SSP contractors? Are there existing forms and systems for tracking and follow-up, or will the contractor develop their own?

A14: Registry Services are used to compile and maintain a list of SSP providers offering Services that complement the care needed by the Client or potential Client. Screening, forms and systems for tracking and follow-up are developed by the contractor.

Q15: On Appendix C, Performance Requirements Summary Chart, will you provide clarification on what the acceptable levels are? Is it 95% for all of them?

A15: Yes, it's 95% for all.

Q16: In Appendix B, SOW, Section 3.2.1 for Case Management, it states that monthly telephone contact must be maintained with 100% of ongoing Clients to ensure the effectiveness of arranged Services and to modify those Services as needed. Are the Clients that we need to call the same ones we have hashed that month and provided Services for, or is this referring to all open Case Management Clients?

A16: All open Case Management Clients.

Q17: With the new RFP, the hashing in Social Assistance Management System (SAMS) will be different, correct?

A17: Yes, SAMS will be aligned with the Services provided through the SSP.

Q18: Will the contractors receive training on the changes in SAMS?

A18: Yes, SAMS training will be ongoing to all contractors, and may be individualized as needed.

Q19: Please define and provide examples of a "Match" and "Non-match."

A19: The SSP requires that Proposers provide a 15% match of its total Program costs. This may be in the form of a cash match (cash or grants donated to the program by the agency providing the services, or an outside agency), an in-kind match (staff time donated to the program volunteers, etc.), or a combination of both. Please refer to Section 16.0, page 24 of Appendix B, SOW. The definition of Non-Match as defined by the California Department of Aging is local funding that does not qualify as matching contributions and/or is not being budgeted as matching contributions (i.e. overmatch). Non-Match is not calculated when determining the match requirement (CSS).

Q20: Please define and provide examples of "Grant Related Income".

A20: Grant related income is income generated by the agency as a result of administering the program (e.g., donations, fund raising, etc.).

Q21: Can you provide an example or a sample of the formulas laid out for the narrative portion of the Cost Proposal reflected in Section 2.9.1.4 of the RFP?

A21: Personnel costs are one example: With a full-time employee, your agency would state what percentage of the employee's time will be charged to the Program, the total number of employees that will be charged to the Program, and the number of months they will be working on the Program during the fiscal year. Your agency will be evaluated based on the reasoning behind the costs.

Q22: Do you have a written sample of the cost formulas in the Contract?

A22: Example: Case Manager - 1 Full Time Employee (FTE) X 100% x 3,200/month x 12 months = $38,400.

Q23: Section 2.7.2, page 28 of the RFP states, "Each page of the Business and Cost Proposal must have the heading of the RFP Title and the type of Proposal (Business or Cost Proposal) in the upper right-hand corner of the page. Does this requirement apply to attachments as well?

A23: This does not apply to the attachments.

Q24: On Appendix D, Exhibit 1, page 1 of 3, should we add the service units from all service categories in column B, or should we complete a separate form for each primary service proposed?

A24: Appendix D, Exhibit 1, page 1 of 3, column B totals the number of unduplicated Clients from each Supervisorial District. The Proposer is not required to enter information on this page. Information entered on the pages following page 1 of 3 of Appendix D, Exhibit 1 will automatically be extracted from those pages and reflected page 1 of 3.

Q25: On Appendix D, Exhibit 2, Budget, should we submit a one (1) year budget, or a four (4) year budget?

A25: Please submit a budget for fiscal year 2010-2011 only.

Q26: Are Contractors required to ask for donations from Clients? If so, is there a minimum amount that must be budgeted?

A26: Contractors are not required to ask for donations from Clients receiving SSP Services.

Q27: Section 2.7.5, page 28 of the RFP states, "Proposer shall number each page of the Proposal sequentially." The Business and Cost Proposals are going to be in the same binder. Should the numbering of the Cost Proposal continue from the Business Proposal?

A27: Yes, the numbering should continue from the Business Proposal to the Cost Proposal.

Q28: Section 2.7.6, page 36 of the RFP states, "Each section of the Business and Cost Proposals shall be tabbed and clearly identified in the table of contents and following the order mentioned in Section 2.8 and 2.9 of this RFP." All attachments must be attached immediately after the narrative section the Proposer is responding to." A Table of Contents is not required for the Cost Proposal per the content and sequence section of the Cost Proposal given in Section 2.9.1, page 36 of the RFP. If so, does the Table of Contents referred to under Section 2.7.6 serve for both Proposals?

A28: Section 2.9.1, page 28 of the RFP does not state that a Table of Contents is not needed for the Cost Proposal. Yes, please include one (1) Table of Contents for both the Business and Cost Proposals.

Q29: Section 1.36, page 23 of the RFP states that in evaluating Proposals, the County will give preference to businesses that are certified by the County as Transitional Job Opportunity Vendors..." Does our agency need to include Exhibit 13 in our Proposal if we are not applying for Transitional Job Opportunities Preference Program, just because it is a required form?

A29: If the Transitional Job Opportunities Preference Program does not apply to your agency, it is not required to be submitted.

Q30: We were qualified for the Transitional Job Opportunities Preference Program through the Department of Public Works, County of Los Angeles. Is it necessary to resubmit this information through this Proposal?

A30: Yes.

Q31: Our organization has experience providing all of the seven (7) primary services mentioned in Section 1.0 of the RFP; however, our physical site is not located in Los Angeles County. We have a Meals on Wheels programs that provides services in all of Los Angeles County. Are we still eligible to apply for this RFP?

A31: According to Section 1.4, Minimum Mandatory Requirements of the RFP, "Proposers shall have, or will have by Contract award, an office location in Los Angeles County." Qualified Proposers must meet this standard.

Q32: How will the County be involved with the coordination of services between provider types?

A32: The Area Agency on Aging (AAA) has oversight over Program development. Quarterly meetings are held with Providers in order to discuss/share issues related to Program coordination and delivery. Please refer to Appendix B, SOW, Section 3.0, pages 8-11. Please also refer to Appendix C, Performance Requirements Summary Chart.

Q33: Will the County distribute a contact list of funded Contractors to facilitate service coordination?

A33: The AAA will share a list of Contractors with their contact information.

Q34: What is the function of the CSS ITS and how is it utilized for the SSP?

A34: CSS ITS functions as a SAMS IT support and training venue for SSP Contractors. CSS ITS is available to answer questions and address concerns related to the SAMS input requirements. Please refer to Appendix B, SOW, Section 13.0, page 19. For those unfamiliar with SAMS, SAMS is the Information Technology (IT) system CSS uses for managing our Clients' data base.

Q35: Since we have had the SAMS system for a while, will there be any data available to us during this process, in terms of the amount of Services delivered to populations in certain areas? Any data reports on that?

A35: Not all Proposers have access to SAMS, so providing this information to our current Contractors may give them an unfair advantage over the other Proposers.

Q36. We have a contract with the City of Los Angeles Department of Aging that includes Case Management for District 10. When we prepare the SSP Proposal for Case Management Services in Los Angeles County, should we exclude the Services provided in District 10 since these Services are included in the Los Angeles City Contract?

A36: Los Angeles City is in a separate Planning Service Area (PSA) than Los Angeles County. When evaluating the Proposals, evaluators will rate based on Services proposed to be provided in the areas in Los Angeles County, excluding the Los Angeles City boundaries.

Q37: Our agency has a Social Worker on staff. Part of the Social Worker's time is charged to the Los Angeles City Program. If funded, time will be charged for this same staff person to the Los Angeles County Program. Can the Social Worker work on both Programs, or should these be separate individuals?

A37: Your agency will need to determine the percentage of time that the Social Worker will devote to the Los Angeles County program(s) as opposed to the Los Angeles City program(s), and include this information in the Proposal.

Q38: We are eliminating our current program with the City of Los Angeles. In the meantime, we are not turning away any Clients. Can we refer these Clients to the Los Angeles County program?

A38: We are unable to answer that question for you. Please submit the Proposal based on the Services your agency believes it can provide, and the Proposal will be evaluated accordingly.

Q39: Some of the services in the SSP RFP are similar to the Home-Based Care (HBC) grant. Will SSP Services phase out the HBC Services?

A39: Yes, the HBC program will no longer be offered. Many of the HBC Services will be included in the SSP contract.

Q40: In the current HBC Program, there is a provision for Companionship Respite Services. I don't see this service category in the SSP RFP. Will this Service continue to be offered?

A40: Companionship Respite is not being offered in the current SSP RFP.

Q41: May a Proposer propose to serve more than one city?

A41: Yes.

Q42: Is the use of volunteers mandatory?

A42: No.

Q43: Should the rates for the subcontractor be no more than the maximum rate of reimbursement for each service category?

A43: The reimbursement rates for all services delivered will be reimbursed only up to the maximum levels stated in the RFP.

Q44: Each Service has a maximum rate of reimbursement, do we bid that rate, or can we bid less?

A44: Your organization may bid for a lesser reimbursement rate however, your organization can only be reimbursed at the maximum rate of reimbursement stated in Appendix B, SOW, Section 3.2 for each service category.

Q45: Other than Homemaker, Personal Care and In-Home Respite, is there anything allocated for Purchase of Services (POS) (i.e., DME, ERS, emergency rent, emergency utility payments, etc.) Are any purchases of service allowable at all under this contract?

A45: In the former Integrated Care Management (ICM) Program, that portion of POS was primarily with Linkages for your Community-Based Services Program (CBSP) funding. Now, that the funding has been extracted from this program, POS is no longer available.

Q46: There is no POS money in the new (SSP) RFP, correct? How do we pay for Services that have a cost?

A46: Correct, there is no POS (Purchase of Services) money in the new SSP RFP. POS is a component of the State Linkages Program, and is not part of the SSP.

Q47: May our agency use Personal Care funds mentioned in Appendix B, SOW, Section 3.2.3, page 9 to purchase grab bars, blood pressure monitors, canes, etc.?

A47: Personal Care funds may not be used to purchase equipment. Please be aware that although there is a Case Management component to the SSP, it is not a Linkages Program. The SSP does not provide for the purchase of equipment.

Q48: Will Service Authorization be included in the SSP?

A48: Service Authorization is a component of the State Linkages Program. Linkages Services are not a part of the SSP.

Q49: On page 17 of Appendix B, SOW, Section 7.0 states that the contractor shall convene a committee or task group that performs Continuous Quality Improvement (CQI) functions, including conducting customer satisfaction surveys and other specific studies related to the CQI processes. What specifically are those other studies? Is that up to us?

A49: Yes, it is up to your agency.

Q50: If our organization is proposing to provide Homemaker Services, and we are planning to subcontract, is there any requirement for getting competitive bids?

A50: Federal regulations do not require competitive bids for Contracts under $100,000, but CSS requires that the contractor receive three (3) bids. When your organization selects a bidder, justification is needed, and must be kept on file. Please refer to Appendix A, Sample Contract, Section 44.0 for additional information on Independent Contractor Status.

Q51: Is there a maximum amount that can be spent per client per year?

A51: There is no maximum.

Q52: Is there a maximum length of time that clients may participate in the SSP?

A52: Generally, no. It depends on the client's needs. With the Case Management service category, there are specific goals that need to be met with the care plan. Once these goals have been met, the client would no longer be enrolled. If the goals have not been met, the client would continue with the program.

Q53: Section 3.2.1, page 9 of Appendix B, SOW describes the intake process as beginning when the initial call comes in. The intake process must be completed within 14 days of the initial call. If our agency has a wait list, how can we complete the intake within 14 days, and ensure the Client is receiving Services in another 14 days? How can we stay in compliance?

A53: The 14 day period would not apply in this case because the individual is not being taken on as a Client. The person is being placed on a wait list. When the wait list opens up and Services are available, the Client would be contacted, and the 14 day period would begin.

Q54: For Case Management, we have an Intake Coordinator who normally puts Client information on the Universal Intake form when the initial call is received. That person may still go on the wait list and the form when Services are available. Does entering Client information on the Universal Intake form equate to taking the person on as a Client?

A54: No. The person will become a Client once Services are available to them. It is at this point that the 14 day period begins in which the assessment must be completed.

Q55: Section 2.1, page 7 of Appendix B, SOW states that there is an emphasis on Services being provided to low income minority individuals. There is an emphasis, but it is not a requirement for Clients to be low income minorities, correct?

A55: That is correct.

Q56: So in completing the RFP, we will emphasize that population, but we do not have to reflect it as eligibility criteria, correct?

A56: There is an emphasis on providing Services to that population but it is not a requirement.

Q57: I have a question on Section 1.1.5 of the RFP, page 9, pertaining to the Est. Funding/Service Units Chart. For Case Management, a little over 5,000 units are shown (for Supervisorial District 2). Is there an unduplicated number of Clients that should be reflected in the chart for this service area?

A57: The chart is strictly based on units.

Q58: In reference to compensation, is it possible for CSS to provide an agency with two (2) months pay advancement?

A58: Contractor invoices are due by the 10th day of each month following the month in which services were rendered. Invoices are processed on a monthly basis. There are no allowances for Contractors receiving payment in advance. Please refer to Section 1.1.5.3.3, page 8 of the RFP for further details.

Q59: Is there an unduplicated number of Clients to be served in Case Management during the fiscal year?

A59: The RFP does not specify unduplicated Clients, only units of service. This is because CSS' contract with the State (CDA) requires CSS to report units of service. For the intake process, Clients must be unduplicated.

Q60: Is the county requiring a specific form for initial assessment, reassessments and care plans, or must the contractor develop their own forms? (Page 9, Section 3.2.1 of the Statement of Work). The SOW states that Case Management services include a comprehensive assessment of the client (including physical, psychological, and social needs)...and our question is, does completing the Universal Intake form meet this requirement or should we use a second assessment form in addition to the Universal Intake form?

A60: The specific required form is the Universal Intake form (See Exhibit E, Attachment XVIII) may also be used as a screening tool and an assessment tool. At this time, there is no standardized Care Plan. Contractors may use their own written Care Plan.

Q61: In reference to Section 3.2.6, page 11 of Appendix B, SOW, when we make an Outreach contact, is it necessary to complete a Universal Intake form for that contact.

A61: There is no Client detail required. It's just a hash mark for collecting the numbers.

Q62: Does Outreach require direct contact with potential clients, or can it include mailing and/or advertising?

A62: The definition for the Outreach service category is a one on one contact (Appendix B, SOW, Section 3.2.6) within this service category, unless specific target groups can be identified. Within the Community Outreach (Appendix B, SOW, Section 4.0), there are specific communities that need to be outreached to, so mailing is fine with Community Outreach.

Q63: Please provide a further description of Outreach Services. Is this similar to the intake component in existing Programs?

A63: There are two specific Outreach categories. One is the universal component of Appendix B, SOW, Section 4.0, page 12 which requires all contractors to provide Community Outreach to seniors, veterans, homeless and Lesbian-Gay-Bisexual-Transgender communities in the Supervisorial District the contractor serves. The second Outreach, Section 3.2.6, page 11, is a service category of the Services provided in the SSP SOW. This is a one-on-one contact, except when specifically targeted group presentations are deemed appropriate.

Q64: Please explain how Outreach is conducted to be billed by the hour. Is one contact with a potential Client considered one hour? Must the potential Client outreached to become an actual Client? How is the Outreach tracked/documented?

A64: The hourly reimbursement rate of the Outreach service category includes preparation time, service time, and travel time. One contact with a potential Client is not necessarily considered one hour, unless the amount of preparation, service and travel time used would equal one hour. The Outreach service category does not require that the potential Client to become a Client. A tracking/documentation method would need to be developed by the contractor to support invoicing justification.

Q65: If volunteers assist with the Outreach (service category), may the agency still bill for this?

A65: Yes, agencies may bill for Outreach provided by volunteers that make one-on-one contact with seniors.

Q66: If a team goes out together for Outreach, may the agency bill for each person's time at the contracted rate, or should the agency submit one bill for the entire group?

A66: The agency should bill for each person's time at the contracted rate.

Q67: Is there Outreach funding available for an underrepresented population?

A67: Appendix B, SOW, Section 3.2.6.1, page 11 indicates that "Primary Outreach shall be on a one-on-one basis, except when specifically targeted group presentations are deemed appropriate for a particular outreach need." The underrepresented population may apply to the targeted group need.

Q68: Can you provide clarification and examples of the "green initiative" (Section 2.8.5 of the RFP and Section 5.8 of Appendix B, SOW)?

A68: This is something the Board of Supervisors has implemented. Examples include going paperless, recycling, or copying documents on two sides instead of one. We are looking for innovative approaches.

Q69: The SSP RFP lists seven (7) service categories. Are agencies required to provide all seven services, or may we choose which services we would like to provide.

A69: Agencies may choose to provide as many, or as few services as it would like.

Q70: May the services be subcontracted out to other agencies?

A70: Yes, but subcontractors will be held to the same requirements of the contract (see Appendix A, Sample Contract) that the contractor will be held to.

Q71: For the Services shown in Appendix B, Sow, Section 3.2.3 and 3.2.3 and 3.2.4, pages 9 and 10, must we contract these services out?

A71: Your agency may choose to subcontract with another agency. If so, subcontractors will be held to the same requirements of the contract (see Appendix A, Sample Contract) that the contractor will be held to.

Q72: Section 2.7.1 of the RFP states that Proposals must be typed (on 8 ½" by 11" paper), one space (1.0) between each line, with margins set at 1.0 inch or greater, and a standard twelve (12) Arial letter quality font. To clarify, does this mean single spaced or double spaced?

A72: Single spaced.

Q73: Section 2.7.3 of the RFP states that the Proposal shall clearly indicate in each section of the Business Proposal the Section Heading, Section Letter, and Number (if applicable). There are no section headings. How should we proceed?

A73: There actually are section headings: "Proposal Evaluation and Criteria", "Green Initiative", "Quality Control Plan", "Business Proposal Required Forms" and "Proposer's Financial Capability". The section numbers include 3.4.1.1, 3.4.1.2, 3.4.1.3, etc. There are no section letters.

Q74: If a Proposer is subcontracting Alzheimer's Day Care services, does the staff requirement of a nurse apply to the subcontractor or the contractor?

A74: Both.

Q75: Section 3.2.5, page 11 of Appendix B, SOW states that a nurse or comparable health professional, licensed by the state of California, shall manage and monitor the correct medication dosages. What is meant by "manage" and "monitor"?

A75: An example may be best. If a Client comes into the (Alzheimer's Day Care) facility and they are taking prescribed medication at specific times during the day, a person with a medical license would need to be on staff to monitor the delivery of that medication and ensure the medication is being taken, and that it is being taken properly.

Q76: Does a staff person with a medical license have to be physically present? Can they monitor on a weekly or monthly basis? We do have a health care facility. Staff currently ensures that the medication is being taken properly, but they are not medical professionals. We did not think that this was required.

A76: A nurse or comparable health professional, licensed by the state of California, must be physically present to manage and monitor the medication at times when medication is being taken by all Clients.

Q77: If an agency already has a multi-purpose center and a section in the center is being used for a county program, is that acceptable?

A77: Yes, that is acceptable.

Q78: Is there a ceiling on the cost?

A78: The maximum indirect cost is 8%.

Q79: Is there a ceiling on costs designated for facility space?

A79: No, although when we negotiate a contract and the facility cost is higher than $2 (two dollars) per square foot, that cost is questioned and requires supporting documentation. As far as the proposal, it's the agency's decision, but part of the proposal pertains to cost efficiency and we will be looking for the lowest cost possible.

Q80: What is the limit on the amount of funding that may be designated for administrative costs (payroll, accounting, etc.)?

A80: The limit on administrative/Indirect costs is 8%.

Q81: Can an agency apply only for the Alzheimer's Day Care service category?

A81: Yes.

Q82: Can an agency apply for funding for the entire Supervisorial District that we serve?

A82: Yes.

Q83: Section 3.2.5, page 10 of the SOW states that a contractor shall coordinate with a licensed Adult Day Health Care (ADHC) or Alzheimer's Day Care Resource Center (ADCRC) to provide Alzheimer's Day Care Services. What does "coordinate" mean?

A83: Coordinate means to "work with".

Q84: Can an agency provide by provide Alzheimer's Day Care Services on its own?

A84: If the agency is a licensed ADHC or ADCRC, the answer is yes.

Q85: Can an agency submit a Proposal for SSP Services as the lead agency, and be included as a subcontractor on a second Proposal?

A85: Your agency may only have its name on one Proposal as the lead agency. The organization that chooses to apply for Services by using your agency as a subcontractor must have its name on the second Proposal as the lead agency.

Q86: Section 3.2.5.1.8, page 11 of Appendix B, SOW states that a nurse or comparable health professional, licensed by the state of

California, shall manage and monitor the correct medication dosages. What does "monitor" mean?

A86: To ensure that the medication is being given in compliance with the proper dosage and that the instructions on the medicine bottle are being followed.

Q87: Section 1.1.5, page 7 of the RFP indicates that the funding amount is for four (4) years. Are the amounts in the chart on page 9 for one (1) year, or four (4) years?

A87: The totals reflected on the Est. Funding/Service Units Chart in Section 1.1.5, page 9 are for Fiscal Year 2010-2011 only. Additional funding will be provided for each fiscal year of the 4 (four) year contract dependent upon federal and state funding.

Q88: Must prospective Contractors apply for the total funding for the primary service in a Supervisorial District, or is it allowable to apply for only a portion of the funding in a Service Category?

A88: A Proposer may apply for funding for an entire Supervisorial District, or a portion of a Supervisorial District for each Service Category.

Q89: If a Proposer may apply for a portion of funding in a Service Category, please clarify Section 2.8.4.9, "Comparability of Proposal Objectives to RFP Objectives", pages 33 and 34. Is the Service Unit Requirement for the entire number of service units and amount of funding?

A89: If a Proposer chooses to apply for a portion of a Supervisorial District, the Proposer may provide service units for each service category that are proportionate to the area being served. The Proposer may make this determination.

Q90: Section 2.8.4.5, page 33 of the RFP asks the Proposer to identify the methodology for two (2) ways a Proposer will ensure that Services meet the minimum requirements set forth in Appendix B, SOW, Section 3.2, pages 8-12, and Section 2.8.6, page 34 of the RFP asks the Proposer to present a comprehensive Quality Control Plan to be utilized by the Proposer as a self-monitoring tool. Am I reading this correctly? It seems to be redundant, and I'm afraid that we are missing something that you are asking for.

A90: Yes, that is correct. You are not missing anything. Both sections must be answered.

Q91: In Section 2.8.1.1.1, page 29 of the RFP, are agencies being asked to pay the State fee to obtain a "Certificate of Status" (which is the term used on the State's request form for such document)? If we don't have the Certificate, but we do have the paperwork of our latest filing, "Statement of Information" with the State of California Secretary of State, is that sufficient to fulfill this requirement? Note: Our agency completes this form every year, but they do not automatically send us a Certificate.

A91: Yes, the Proposer is being asked to pay the State fee to obtain a "Certificate of Status."

Q92: Will the County entertain proposals from for-profit companies, or is proposal limited to non-profit/government organizations? Has the County awarded Services to for-profit entities in the past?

A92: Per California Department of Aging regulations, Title III Case Management services are only open to public or non-profit agencies. The County has not awarded program funds to for-profit entities in the past.