

**2009 Basic Residential Services For Children**



- Q1.** The Proposed Service Summary Form was retrieved from the site on today and we needed to know its place in the final copy of the RFP. We also needed to know do we list all 67 counties on the Service Information section as we plan to serve the entire state?
- R1. Vendors may specify that they propose to serve “statewide”.**
- Q2.** Basic Residential Services #2009-100-12: 4.2.5.3.4, TLP #2009-100-11: 4.2.5.3.4; Mothers and Infants #2009-100-10: 4.2.5.3.4: & Moderate #2009-100-08: 4.2.5.3.4 – All say “vendors must identify the specific county/counties to be served” – ***Does this mean we are unable to state on the RFP proposal “statewide”? If we must specify the counties does it mean we are unable to accept placement of the child not located in those counties?***
- R2. See R1.**
- Q3.** Basic Residential Services #2009-100-12: 4.2.5.4.3, TLP #2009-100-11: 4.2.5.4.3; Mothers and Infants #2009-100-10: 4.2.5.4.3: & Moderate #2009-100-08: 4.2.5.4.3 – “Vendor must comply with all he terms and conditions of.....Rehabilitation Act of 1973, as amended, the Americans with Disabilities Act, etc.” – ***What if we are “in process” with compliance with the Rehabilitation Act of 1973? Is this acceptable?***
- R3. Then a plan approved by the provider’s board should be attached with a time line that shows when compliance will be achieved. That plan will have to be approved by our EEO office before a contract can be issued.**
- Q4.** Basic Residential Services #2009-100-12: 4.2.5.3.6, TLP #2009-100-11: 4.2.5.3.6; Mothers and Infants #2009-100-10: 4.2.5.3.6: & Moderate #2009-100-08: 4.2.5.3.6 – states that al natural disaster evacuation/pandemic plans must be approved by State DHR. ***What happens if State DHR does not approve of what we put in this section of the proposal?***
- R4. Since this is a new requirement we will work with the Vendor .**
- Q5.** Basic Residential 4.2.5.3.6 Natural Disaster Evacuation/Pandemic Plans: Is the Department open to a reciprocal agreement between agencies for temporary housing of children / staff in the event of a natural disaster? I.e. Two agencies agree to house each other's children and staff to care for children if either is the victim of a natural disaster.

Secondly, do you have any guidelines as to how far apart two such agencies should be to be acceptable to the department?

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- R5. Yes, we would be open to a reciprocal agreement, we do not have any guidelines as to a suitable distance.**
- Q6.** In reference to section: 4.2.5.2 Vendor Financial Stability. Can a vendor that has been in business more than a year but less than two years provide a Compilation Statement of Assets prepared by the Certified Public Accounting Firm that prepares the vendor's 990 Form for the IRS as a substitute until an audit has been completed?
- R6. Yes.**
- Q7.** 3.1 Planning Responsibility, page 15  
This section addresses planning responsibility and requires that all services be "... authorized on an ISP." It goes on to say that the ISP document must be provided within 10 days of placement or SDHR should be notified. This has been a serious problem for providers. Services must be authorized in the ISP and Treatment Plan in order to bill Medicaid for Basic Living Skills, etc. What if we do not have a copy of the ISP in our files, even after repeated requests to the county and to SDHR? What is our liability if we provide services or bill Medicaid for services without the ISP? We are also audited by Medicaid, so it is not just a DHR requirement.
- R7. Your treatment plan should cover what you do for Medicaid billing and if you notify SDHR and you still do not get the ISP then notify us for the second time.**
- Q8.** 3.2 Program Requirements, E, page 16  
This section describes a 10 day initial Treatment Plan and a 30 day Comprehensive Treatment Plan. Is it acceptable to only complete a Comprehensive Treatment Plan within 10 days of placement if all components are included?
- R8. Yes.**
- Q9.** 4.2.5.3.6 Natural Disaster Evacuation/Pandemic Plans, page 21  
This section requires a Natural Disaster Evacuation/Pandemic Plan that is approved by SDHR. Where do we send them and who will approve them? Must they be approved before the RFP?
- R9. You include them in your proposal and they will be approved if you are a selected provider by SDHR prior to contracting.**
- Q10.** Will you please make fillable forms available for the service summary form, cover sheet, and appendices E and G?
- Q10. Yes. They are available on the Department's website.**



**Q11. Proposed Service Summary Form**

County/counties to be served—Are all slots statewide slots?  
Should providers list all 67 counties for each proposal?

**R11. Statewide.**

**Q12. Gender, Age, number of slots-**

Is the information binding if the number of slots purposed is different from the number of slots awarded?

**R12. Yes.**

**Q13. Page 6, Schedule of events**

Is a letter of intent needed for this proposal?

**R13. No.**

**Q14. Page 7, Section 1.0 Project Overview**

Do the 192 slots include emergency slots to be allocated?

**R14. No.**

**Q15. Page 18 4.2 Proposal format**

How many tabs are expected for each proposal?

**R15. The number of tabs used per proposal is determined by how it's structured.**

**Q16. Page 23, 5.0 COST PROPOSAL**

A. What portion of the daily rate will be state dollars? What portion will be Medicaid dollars?

B. Is the rate adjustable depending on number of slots awarded? (This question is related to economies of scale)

C. Is it possible for providers to keep the all or part of the funds received for Medicaid services billed?

**R16. A. State 65%. Medicaid 35%.  
B. No  
C. No**

**Q17. Where does the Proposed Service Summary Form go?**

**R17. Submit one copy of the Proposed Service Summary Form in separate envelope. Using a paper clip attach the envelope to the original proposal.**

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**Q18.** 4.2.5.1.6 Background Checks - Can background checks be reduced and placed on one page or would you prefer each background to be on separate pages?

**R18. Yes. Include a list of employees and indicate whether they have been cleared.**

**Q19.** 4.2.5.3.7 Assessment of Benefits and Impact - What services are you referring to? Core services offered in the contract or additional services?

**R19. The services being proposed.**