

Question & Answers for Community Based Intervention and Therapy Program RFP# GB2024-100-17

Question #	RFP Section	RFP Heading	Question	Answer
1	1.2	Required Licensure/Certification/Credential	Please clarify the licensing requirements. Per Section 1.2, “Vendor must have staff with the required licensure through the State of Alabama to provide services listed in this RFP according to Alabama Medicaid Requirements.” The State Medicaid requirements do not require licensing for all staff who would perform services.	See Staff requirements and qualifications in RFP
2	3.1	Population Served	Who does DHR define as the client for this program? For example, is it the child(ren), caregiver(s), or both?	Both
3	3.2	Program Responsibilities, Staff Requirements and Qualifications	Can you provide clarity on if vendors may propose an alternative team/staffing structure that aligns more directly with the standard operation of an evidence-based intensive in-home model or will the Department award slots in increments of 6 to align with the prescribed caseload requirements?	Slots awarded to align with caseload standards
4	3.2	Specialized Services and Supports	The Section Specialized Services and Supports mentions “providing safety equipment, as clinically indicated...”. What is a reasonable cost per family to anticipate for purchasing safety equipment and will the cost of the safety equipment be reimbursed by DHR?	Linkage to community resources to help with purchase of equipment, if necessary
5	3.2	Specialized Services and Supports	The Section Specialized Services and Supports mentions the need for a Family Search tool. Will DHR reimburse for the costs of this tool?	No
6	3.3	Aftercare	In the Section Aftercare, the RFP states “If a child must re-enter care during this time, continued services must be provided to the family at no additional cost to the Department.” Is Medicaid service delivery and billing allowable during the Aftercare period? If so, what would be the allowable billable codes and/or services?	No

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7	3.3	Aftercare	Will the Department entertain budget proposals which prescribe a Successful Outcome Incentive that would be paid for each family that does not enter or re-enter care after the 3 month Aftercare period?	No
8	5	Cost Proposal	The RFP references use of code H0037; the only fee schedule where we could locate this code was the Rehab Option DYS Fee Schedule (found here: https://medicaid.alabama.gov/content/Gated/7.3G_Fee_Schedules/7.3G_Rehab_Option_Fee_Schedule_DYS_8-27-24.pdf), and it does not seem to appear on the Rehab Option DHR Coding Crosswalk document (found here: https://medicaid.alabama.gov/content/Gated/7.3G_Fee_Schedules/7.3G_Rehab_Option_Fee_Schedule_DHR_3-9-23.pdf). Can you please clarify if H0037 is being added to the DHR fee schedule?	Yes
9	5	Cost Proposal	Can you confirm that H0037 will be paid on a per diem, per day of enrollment basis (not per day of encounter/service)?	1 per day with 180 unit max per year
10	5	Cost Proposal	Which staff can bill for Medicaid rehab services?	This is outlined by Medicaid
11	5	Cost Proposal	What are the applicable services that would fall under the H0037 billing code?	Multi-Person Intensive Family Intervention
12	5	Cost Proposal	Can the Department verify that the H0037 billing code will be invoiced at \$82 per day and will be limited to 180 units per year? Will the Department accept proposals that include a daily per diem for each unfilled slot to be billed to DHR to maintain staffing capacity in the program?	\$100 per day 180 units per year No daily per diem
13	5	Cost Proposal	Is there a process to secure additional units if it is determined that a client requires more than 180 units per year?	No
14	5	Cost Proposal	Is there a process to request and secure a rate increase for the H0037 billing code in years 2 and 3 of the contract?	No
15	5	Cost Proposal	If the rate for the H0037 billing code is either not \$82 per day or limited to 180 units per year, can the Department confirm the correct billing rate, unit of measurement, and billable maximum?	\$100 per day with limit of 180 units per year
16	5	Cost Proposal	What credentials are required to bill for the H0037 billing code?	See staff requirements and guidelines in RFP

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17	5	Cost Proposal	What Medicaid Rehab Services can be delivered concurrently with the H0037 service?	Multi-Person Intensive Family Intervention
18	5	Cost Proposal	For services and activities that fall outside of the scope of a Medicaid Rehab Service, will the Department provide reimbursement via a Cost Reimbursement Methodology, a daily per diem, or a monthly case rate?	No
19	5	Cost Proposal	Will the Department accept cost proposals that include elevated funding/reimbursement for families with elevated needs (e.g. multiple children, living at different addresses, other)?	No
20	5	Cost Proposal	Will DHR entertain budget proposals that include a cost reimbursement component to cover startup costs incurred prior to 12/1/2024 to ensure the team is ready to serve starting 12/1/2024?	No
21	5	Cost Proposal	Will the Department accept proposals that include a daily per diem for each unfilled slot to be billed to DHR to maintain staffing capacity in the program?	No
22	5	Cost Proposal	Section 5.0 states “Vendors will bill Medicaid for all Medicaid Rehab Services”. Is the Department expecting to receive a Cost Proposal from potential vendors in the response to this RFP?	Yes with slots at \$100 Medicaid Rate

Amendment will be posted to the website