

State of Hawaii
Department of Health
Developmental Disabilities Division
Case Management and Information Services Branch
Contracts and Resource Development Section

Addendum 1

03/14/12

To

Request for Proposals

HTH 501-06
February 28, 2012

March 14, 2012

ADDENDUM NO. 1

To

**REQUEST FOR PROPOSALS
Long Term Adult Support and Resources (LASR)
HTH 501-06**

The Department of Health, Developmental Disabilities Division, Case Management and Information Services Branch, Contracts and Resource Development Section is issuing this addendum to HTH 501-06, Long Term Adult Support and Resources (LASR) for the purposes of:

- Responding to questions that arose at the orientation meeting of March 7, 2012 and written questions subsequently submitted in accordance with Section 1-V, of the RFP.
- Amending the RFP.
- Final Revised Proposals

The proposal submittal deadline:

- is amended to <new date>.
- is not amended.
- for Final Revised Proposals is <date>.

Attached is (are):

- A summary of the questions raised and responses for purposes of clarification of the RFP requirements.
- Amendments to the RFP.
- Details of the request for final revised proposals.

If you have any questions, contact:

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Developmental Disabilities Division
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**Long Term Adult Support and Resources (LASR)
Request For Proposal (RFP) No. HTH 501
Orientation Session Summary
March 7, 2012**

***Written Questions by March 9, 2012
Publication March 14, 2012***

I. Introductions

- a. Approximately 14 individuals from 5 organizations participated in the RFP Orientation Session held on March 7, 2012.
- b. Review of scheduled due dates - Request for Proposal Application is due on **Wednesday, March 28, 2012.**

II. Questions and concerns

- a. **Please clarify p. 2-1, D. Description of the target population to be served.**

The target population for LASR services is adults only.

DDD, however, is authorized statutorily to serve both adults and children (Hawaii Revised Statutes, Chapter 333 F).

- b. **Proposal Mail-in and delivery information sheet - Will there be a neighbor island drop-off site?**

No neighbor island drop off.

Please mail in your applications by March 28, 2012 post-mark to:

Department of Health
Developmental Disabilities Division
Case Management and Information Services Branch
3627 Kilauea Avenue, Room 104
Honolulu, Hawaii 96816

c. Can Providers look at previous proposals?

The proposals are not available.

d. Please clarify p. 1-9, (6) Applicant not responsible (HAR Section 3-143-610 (a) (2)).

Any proposal submitted by an applicant that is found not to be a responsible provider shall be rejected.

§3-143-610 Rejection of proposals. (a) In addition to any other basis for mandatory rejection established elsewhere in this chapter, proposals shall be rejected for reasons including, but not limited to:

(1) Proposal not responsive. Any proposal that is not responsive to the request for proposals because of its failure to conform in all material respects to the request for proposals including, but not limited to, the service specifications or other evaluation criteria shall be rejected; or

(2) Applicant not responsible. Any proposal submitted by an applicant that is found not to be a responsible provider shall be rejected.

(b) Notice of rejection. Whenever an applicant's proposal has been rejected under these rules, notice of the rejection shall be sent to the applicant by United States mail that states the reasons for rejection. [Eff 6/19/99; comp **JAN 2 3 20u6**] (Auth: HRS §§103F-

e. Please clarify 2-2, D., "LASER shall be available to all individuals regardless of whether they are enrolled or not enrolled in the DD/ID Medicaid Waiver program.

LASR is available to individuals who are pending admission to waiver services. There shall be no duplication of services.

f. Please clarify the number of copies to be submitted.

Four (4), one (1) original and three (3) copies.

g. Should current LASR providers discharge all on-going LASR cases on June 30, 2012?

Yes.

h. Can one proposal with separate budgets for different areas be submitted?

Yes, provide budget and staffing information for each area to be served based on the geographical areas found on page 2-8.

i. Please clarify p. 2-3, B. Secondary purchaser participation.

This refers to HAR Section 3-143-608, in which purchasing agencies combine purchases of services to increase efficiency. There is **no** secondary purchaser for this service.

j. Please clarify p. 2-4, E. The contract may be extended provided that the contract price shall remain the same or is adjusted per any contract price adjustment provision. Is there intent to put in a provision?

Yes, this provision will be stated in the contract upon award. This provision will allow the contract to be extended an additional twelve (12) months beyond the five (5) year contract without resolicitation. This is subject to the availability of funds.

k. Page 2-6, b. The quality assurance and evaluation program shall be agency directed and reflect what the organization independently uses to monitor, evaluate, and improve the services delivered.

The Contracts and Resource Development Section (CRDS) will be doing program monitoring in addition to the fiscal monitoring for the LASR contracts.

i. Page 2-8, 8. Pricing structure or pricing methodology to be used, please clarify.

The pricing structure is as stated and has not changed from the current LASR contract in terms of percentage.

Seventy (70) percent is for direct client supports and thirty (30) percent for administrative fees.

m. Page 2-8, 8. Pricing structure or pricing methodology to be used. What is an accommodation fee?

An accommodation fee is provided regardless if all slots are filled or not. Awarded contracts will receive the thirty (30) percent allowable administrative fees even if the slot is not filled.

n. Page 2-8, 9. Units of service and unit rate – Why did the unit rate decrease from \$10,951?

The rate was determined by the number of slots available and the appropriation amount.

$\$1,029,400.00$ divided by 95 slots = **\$10,835 per slot**

o. What happens to current LASR individuals when the new contracts are awarded?

All individuals will have to be discharged, and, if appropriate, based on Developmental Disabilities Division Case Manager assessment and circle of support, be enrolled into the newly contracted service provider.

p. Will the Developmental Disabilities Division (DDD) conduct a stakeholder meeting to review the RFP?

The DDD will consider this for the next RFP as it brings objectivity and transparency to the RFP process.

q. Page 4-4, 3. Service Delivery. Please clarify Addressing Full Time Equivalency.

The applicant's proposal must address service delivery. Part of the service delivery is a work plan for the major service activities and tasks for LASR which will include addressing full time equivalency.

Full time equivalency or FTE means the ratio of the total number of paid hours during a period (part time, full time, contracted) by the number of working hours in that period Mondays through Fridays.

The ratio units are FTE units or equivalent employees working full-time. In other words, one FTE is equivalent to one employee working full-time.

For example: You have three employees and they work 50 hours, 40 hours, and 10 hours per week – totaling 100 hours. Assuming a full-time employee works 40 hours per week, your full time equivalent calculation is 100 hours divided by 40 hours, or 2.5 FTE.

r. Has the number for E. Hawaii increased? Is there a waiting list for E. Hawaii?

Per the RFP, East Hawaii is projected 10 slots (3 more slots than the 2005 RFP projection), and this is subject to availability of state funds. Although there is a projection for increased need in East Hawaii, the DDD does not guarantee filled slots.

Currently, there is no waitlist. The number of slots for East Hawaii is 7 and 7 are filled as of 2012.

END