Request for Proposal: Emergency Capacity Services Homes for Individuals with Intellectual and/or Developmental Disabilities

## **Questions & Answers**

Q	Bidder Question	DHS Answer	Section	Pg.
	We received this update and we have a few questions. We are a new provider and it was shared that we must complete 24 months of service as a provider before we can apply for a Residential license. We have recently added Respite and Behavioral Supports to our list of	The DHS Information Bulletin that provides guidance on the can be found here: Qualifications for Application for Licensure.  The bidder must meet eligibility requirements to become a DDD/Medicaid approved provider as outlined in the Community Care Program Manual and N.J.A.C 10:44A, Standards for Community Residences for Individuals with Developmental Disabilities.	III. Who Can	6
2.	On page 4 it states that the annual contract award for program operations should not exceed \$900,000. Is the contract ceiling going to be \$900,000 per home, or \$900,000 total inclusive of all 4 homes for which a provider may apply (which would be \$225,000 per home)?	The contract ceiling is up to \$900,000 for each home.	I.Purpose and Intent	4
3.	requirements. What are these/ what information are you asking providers to	documentation requirements is required for the disbursement of	VI. Required Proposal Content	10

		Agreement; a copy of the lease and/or MOA (as applicable) that secures capital funding for the twenty year agreement term; promissory note; Annex A-D; and proof of payment.  Other factors critical to DDD business needs may include an agency's history of compliance with supporting emergency placements, offering emergency respite, or submission of needed documents in a timely manner. Please note that these are examples, but the bidder should include any other factors that they deem appropriate.		
4.	The proposal requires a letter of support from a hospital or medical facility. Is this letter of support meant to describe a partnership where the hospital or medical provider refers patients for emergency service placement? Or just a relationship where the hospital or medical facility may treat ongoing or emergent needs of residents?	A letter of support from a hospital or medical facility is not required. Inclusion of this appendice was an error.	Appendices	12
5.	Please provide clarification on where individuals considered for placement will be coming from?	Individuals referred for placement will be those who are in need of immediate residential services due to homelessness or other emergent circumstances. Referrals for these programs will be provided from the Division.	I.Purpose and Intent	3

6.	Will individuals be dually diagnosed (MI Diagnoses) ?	Individuals referred to this program will require varying levels of support and may be dually diagnosed.	IV. Contract Scope of Work	7
7.	Will the homes be licensed? If yes, how would the division handle the restrictions (door chimes, etc) knowing that individuals will leave every 60 days?	Yes, the homes will be licensed in accordance with N.J.A.C. 10:44A. Any restrictions will be reviewed with the planning team upon admission and documented in the service plan as appropriate.	I.Purpose and Intent	4
8.	If individuals need to move into another placement after 60 days, will they come into the home already enrolled into the Community Care Program? How does the division plan handle that?	Emergency Capacity Services are funded through a contract to ensure that funding is available for the operation of the programs regardless of an individual's enrollment on the Community Care Program. In the event that a person is not enrolled on the CCP or SP, Division staff will remain involved for enrollment and transition support.	I.Purpose and Intent	4
9.	Will the provider still get paid if beds are not occupied?	Due to the no-reject policy requirement, program vacancies are not anticipated. Generally speaking, so long as the program is open, ready and able to support an individual the provider will continue to receive payment for the bed.	I.Purpose and Intent	3
10.	In our experience, vehicles cost more than the amount provided for funding (\$70,000 for an accessible vehicle and \$45,000 for a secondary vehicle). Will there be additional funds provided if proof of costs is submitted?	The total amount available for vehicles is the amount indicated in the RFP, this includes \$70,000 for an accessible vehicle and \$45,000 for a secondary vehicle. Additional funding will not be made available for this purpose.	I.Purpose and Intent	4

11.	Who will be responsible for finding permanent placement if the provider does not have a vacant bed?	The ECS provider is responsible for developing a permanent placement if an alternate opportunity is not available.  As noted in the RFP, if alternate residential services are not secured within 60 days of admission, the bidder is required, with the consent of the individual/guardian and their respective Planning Team, to provide a permanent residential placement for the individual served.	IV. Contract Scope of Work	7
12.	Will licensing standards (free and clear, medication, scripts) be applied to new admissions?	Yes, licensing standards will be applied. The Office of Licensing may waive certain requirements based on individual circumstances. All requests for waivers must be submitted to the Office of Licensing by the vendor.	IV. Contract Scope of Work	7
13.	of the emergency transition?	Any individual admitted to ECS will have an assigned worker (ie. Support Coordinator or Division Staff Person) who will remain involved.	V. General Contracting Information	7