State of Arkansas Department of Human Services

Attachment B
Written Questions

Instructions

This Response Template must be used for submission of written questions. All questions should provide the requested information. Those that do not, may not be answered by DHS. The Vendor may add as many lines as needed. DHS would strongly prefer the Vendor to ask multi-part questions as individual questions on separate lines.

Instructions: Complete all cells of each question asked in the Table below. Clearly identify the referenced section or text.

Question ID	RFP Reference (page number, section number, paragraph)	Specific RFP Language	Question	Answers
Example	page 3, section 1.2, A		Will there be only one vendor selected to provide these services?	
1	Page 11, section 2.2, C	Vendor must be able to provide trauma informed mental health services for clients placed in the program.	If mental health professionals have begun TF-CBT training process and have had trauma-informed training, but are not yet TF-CBT certified, can they provide therapy to TFC clients?	Yes
2	Page 11, section 2.3	a Medicaid Independenct Assessmentprior to	Will the independent assessment date, tier determination, and PASSE attribution information be included in the TFC packet sent to the vendor?	Yes, if thedivision has the information it will be provided.
≺	page 14, section 2.7, A, 5 and Service Criteria, section F, 5		When MH treatment and planning for permanancy are evident, will vendors be assessed damages based on the length of stay exceeding 18 months? For example, the child is waiting on adoption and no adoptive family found by DCFS Adoption specialist.	No, if it is not the vendor holding up the process to achieve permanency.
4	Service Criteria, B, 5, g	Iclient's case will review each plan of care at	Is the vendor or PASSE Care Coordinator responsible for physician review of PCSP?	See Addendum #3.

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5	Page 13, 2.6; Service Criteria, B, 4, 5, 7	· · · · · · · · · · · · · · · · · · ·	Have each of the PASSEs been formally notified of the responsibility of the Care Coordinators related to the TFC population and the requirement to work with TFC vendors on development and implementation of the PCSP?	Yes.
6	Page 7 Response Packet, Information for Evaluation, paragraph 1	Provide a response to each item/question in this section.	What questions or items are referenced here? Does this only apply to addressing the minimum qualifications in attachment G.	Respond to all items in attachment G.
7	Page 11 Performance Based Contracting. Delivery of Treatment 3. paragraph 1	Notify DCFS by phone or fax the next business day of all reports.	Is this referring to local DCFS worker? SSU/Little Rock? In addition to hotline?	Notification should be made to the Child Abuse Hotline, DCFS local office and the SSU.
8	Page 13. Request for Qualification: Care Coordination, Section A, paragraph 2	Support of these homes includes transportation	What transportation support is being referred to?	Transportation assistance specific to the services needed by each TFC family.
9	Page 3 Performance Based Contracting. Delivery of Services, paragraph 2	Levels of care are as follows:	Are Level 1 (sibling to TFC clients) clients subject to all of the PI's, including the reporting	Yes.
10	Page 7 Performance Based Contracting. Delivery of Services. 5.g.	client's case will review each plan of care every ninety days.	Is this service expected though not a reimbursable service by the child's insurer?	No, it is not. See Addendum 3.
11	Page 14. Request for Qualification: Performance Monitoring Section A, paragraph 1	At a minimum, DCFS will monitor the following outcomes:	What are the benchmarks against which the performance monitoring will be measured? How was this determined?	The benchmarks have not been determined yet.
12	Page 12. Request for Qualification: Scope of Work. Administrative Structure, paragraph 1	shall be a mental health paraprofessional	How is mental health paraprofessional defined?	According to Medicaid and PASSE standards.
13		Primary responsibilities shall include twenty- four hour crisis intervention	Is this service separate from what the PASSEs are providing for PASSE clients?	TFC providers will work with the care coordinator to develop a crisis plan that will be part of the PCSP.
14		Sibling group placement must have SSU Manager's prior written approval.	Are double occupancy approvals now necessary for siblings placed in a TFC home?	Yes
15	0	SSU Manager must be notified by fax or email of all admissions to and discharges	Is this notification email/fax in addition to the submission in PIE?	Yes

16	Attachment C- Service Criteria C 4	Vendor must allow the DCFS Family Service Worker to visit in the therapeutic foster home at any time.	If the Denartment of Human Services and other nartners in	No, this provision is not incompatible with federal or state law.
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