**Vendor Questions Regarding RFP #321 Behavioral Health Services**

**Question 1**

 On page 3, Section 1:1 *“Preference will be given to Non-Profit entities.  This will be calculated at 25% Weight in the Evaluation Screening.”* This is repeated in the table on Page 10, Section 18:4 as 25% of total points. Is the preceding (Non-Profit vs For-Profit) negotiable or a hard and fast condition?

**Answer 1**

**This was intentional. Employees of non-profit entities are eligible to receive tuition forgiveness for a portion of their student loans.  This is an extraordinary benefit to employees and costs nothing to the employer or the County. The scoring weight was established to encourage non-profits to respond to the RFP because of this benefit to the employees.**

**Question 2**

If the former, given [the agency posing the question] is a For-Profit Entity – we would not be inclined to participate in the bidding process for RFP #321 for several reasons.

1. All of our clinical operations (both outpatient clinics and school-based mental health services) in all of the counties we work in fall under the auspices of [the agency posing the question].
2. [the agency posing the question] holds all of the clinic licenses and certifications.
3. All of our clinical treatment and support staff are employees of [the agency posing the question].
4. The vast majority of our current contracts [information intentionally omitted] are with [the agency posing the question].
5. In essence, we will enter into the evaluation process 25 points behind our Non-Profit competitors.  This seems unfair.

**Answer 2**

**We do not expect the employer of record to hold ANY certifications or licenses to operate the clinic.  The County operates the clinic and holds all the certifications related to the clinic.  This is an employer of record contract, not program administration contract and therefore is the County’s responsibility.**

**Question 3**

The next question has to do with our ability to provide clinical supervision for/with the treatment staff providing direct services to BHS clients.  Specifically, and in light of the fact that BID #321 is an Employer of Record contract – will [the agency posing the question] be able to include a clinical supervisor for [the agency posing the question] personnel (treatment and direct service) assigned to Behavioral Health Services?  [the agency posing the question] is well aware of the associated risks that come with serving these individuals and families.  This is mitigated by our ability and practice to provide frequent, routine, and as needed supervision of our treatment and direct service personnel.

**Answer 3**

**BHS will provide the clinical supervision in accordance with the various certifications. This includes weekly supervision meetings with LCSW or LPC as well as MDs. BHS and the County have an established risk tolerance. This is one of the challenges associated with using contact staff in this environment. Ultimately, if the County were to add the costs of a FTE supervisor, the additional cost would negate the need to contract the employees.**

**Question 4**

On page 3, Section 2.2 *“All positions and job descriptions will be approved by Racine County Behavioral Health Department.”* And again, in Section 4 (same page), “*Each position will have a specific job description to include required qualifications and essential duties upon award of the contract, all job descriptions for each position will be supplied to provider.”* We would request this be clarified.  On the one hand, it seems that [the agency posing the question] will develop and submit job descriptions for review and approval.  On the other hand, it seems as if Behavioral Health staff will develop the job descriptions without our input – something we typically have never been required to do.  Further, without a clearer understanding of what is required of each position – it is very difficult to propose a range of activities that meets Behavioral Health’s expectation.  Given the preceding, will [the agency posing the question] be able to work with Behavioral Health to develop job descriptions that meet both Racine County’s and [the agency posing the question] standards?

**Answer 4**

**BHS will supply job descriptions.  However, BHS will work collaboratively with any vender to ensure that the Job descriptions are consistent with the provider’s standards.**

**Question 5**

On page 3, Section 2.3 *“Provider will ensure that all clinical staff hold individual liability insurance and provide copies to Purchaser upon request.”*   [the agency posing the question] carries liability insurance for all employees and does not require individual providers to carry liability insurance as well.  While many do – this is under their own volition and not something we compel them to do. Given the preceding, if the agency carries sufficient professional liability insurance for its employees – will individual providers be compelled to obtain their own liability insurance in addition to that which the company already provides?

**Answer 5**

**Historically this has meant the insurance certificate from the company must specifically identify each staff member by name.  We have always utilized the prior employer’s company policy. Moreover, we obtain individual copies for each of the employees in the outpatient clinic area from the insurance providers during the credentialing process. BHS and Racine County strongly encourage all providers delivering therapy services to obtain their own coverage as it is in the best interest of both the employer and individual not to be the same. NASW is relatively inexpensive, typically less than $250/year. To date, most have obtained the insurance, however, it is not a requirement.**