



Network Office  
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Oakland, California 94606  
510. 567.8296

**ALAMEDA COUNTY  
BEHAVIORAL HEALTH CARE SERVICES (BHCS)  
FILLABLE FORMS TEMPLATE  
FOR  
EARLY PERIODIC SCREENING, DIAGNOSIS, AND  
TREATMENT (EPSDT) EXPANSION FOR SCHOOL-  
BASED & CULTURALLY & LINGUISTICALLY  
RESPONSIVE SERVICES (II. A.)**

**1. TITLE PAGE**  
*EPSDT Expansion II. A. RFP #13-03*

<b>Bidder Organization Name</b>			
<i>Select the School District for which you are applying</i>			
<input type="checkbox"/>	<b>A. Alameda Unified School District</b> <i>Ruby Bridges Elementary, Alameda</i>	<input type="checkbox"/>	<b>B. Emeryville Unified School District</b> <i>Anna Yates Elementary, Emeryville</i>
<input type="checkbox"/>	<b>C. Hayward Unified School District</b> <i>Hayward High and Mt. Eden High, Hayward</i>	<input type="checkbox"/>	<b>D. Newark Unified School District</b> <i>MacGregor Alternative Education Center, Newark</i>
<input type="checkbox"/>	<b>E. New Haven Unified School District</b> <i>Searles Elementary &amp; Cesar Chavez Middle, Union City</i>	<input type="checkbox"/>	<b>F. San Leandro Unified School District</b> <i>San Leandro High, Bancroft Middle &amp; Wilson Elementary, San Leandro</i>
<i>Select the Culturally &amp; Linguistically Responsive Service for which you are applying</i>			
<input type="checkbox"/>	<b>A. Spanish Speaking-Central County</b>	<input type="checkbox"/>	<b>B. Cantonese Speaking-Central County</b>
<input type="checkbox"/>	<b>C. Vietnamese Speaking-Central County</b>	<input type="checkbox"/>	<b>D. Cantonese Speaking &amp; Translation for Other Asian Languages-North County</b>
<b>Bidder Organization's Headquarter Address</b>		<b>City/Zip/State</b>	
<b>Name of Organizational Contact Person</b>		<b>Title</b>	
<b>Phone</b>		<b>Email</b>	
<b>Proposal Date</b>			

**EXHIBIT A: BID ACKNOWLEDGEMENT**

*EPSDT Expansion II. A. RFP #13-03*

<b>Bidder Organization Name</b>			
<b>Bidder Organization's Executive Director Name</b>			
<b>Phone Number</b>		<b>Email</b>	
<b>Office Address</b>		<b>City/Zip/State</b>	
<b>Bidder's Organizational Structure</b>			
<input type="checkbox"/>	<b>Non-profit</b> <i>(please provide a copy for proof)</i>	<b>Date in which Organization was incorporated</b>	
<input type="checkbox"/>	<b>Corporation</b>		
<input type="checkbox"/>	<b>Partnership</b>	<b>Organization's Tax ID Number</b>	
<input type="checkbox"/>	<b>Limited Liability Company</b>		
<p><b>I</b> <i>Insert name</i> <b>certify that the below is correct and true:</b></p> <p><b>Statement that Bidder is in good standing with the State of California and has all necessary licenses, permits, certifications, approvals and authorizations necessary in order to perform all of its obligations in connection with this RFP. <i>Insert any other comments, if desired, below.</i></b></p>			
<b>Bidder Organization's Executive Director or Board Member Signature</b>		<b>Date</b>	

## EXHIBIT A: BID ACKNOWLEDGEMENT

### *EPSDT Expansion II. A. RFP #13-03*

The County of Alameda is soliciting bids from qualified Contractors to furnish its requirements per the specifications, terms and conditions contained in the above referenced RFP number. This Bid Acknowledgement must be completed, signed by a responsible officer or employee, dated and submitted with the bid response. Obligations assumed by such signature must be fulfilled.

- 1. Preparation of bids:** (a) All prices and notations must be printed in ink or typewritten. No erasures permitted. Errors may be crossed out and corrections printed in ink or typewritten adjacent and must be initialed in ink by person signing bid. (b) Quote price as specified in RFP. No alterations or changes or any kind shall be permitted to Exhibit B, Bid Form. Responses that do not comply shall be subject to rejection in total.
- 2. Failure to bid:** If you are not submitting a bid but want to remain on the mailing list and receive future bids, complete, sign and return this Bid Acknowledgement and state the reason you are not bidding.
- 3. Taxes and freight charges:** (a) Unless otherwise required and specified in the RFP, the prices quoted herein do not include Sales, Use or other taxes. (b) No charge for delivery, drayage, express, parcel post packing, cartage, insurance, license fees, permits, costs of bonds, or for any other purpose, except taxes legally payable by County, shall be paid by the County unless expressly included and itemized in the bid. (c) Amount paid for transportation of property to the County of Alameda is exempt from Federal Transportation Tax. An exemption certificate is not required where the shipping papers show the consignee as Alameda County, as such papers may be accepted by the carrier as proof of the exempt character of the shipment. (d) Articles sold to the County of Alameda are exempt from certain federal excise taxes. The County shall furnish an exemption certificate.
- 4. Award:** (a) Unless otherwise specified by the Bidder or the RFP gives notice of an all-or-none award, the County may accept any item or group of items of any bid. (b) Bids are subject to acceptance at any time within thirty (30) days of opening, unless otherwise specified in the RFP. (c) A valid, written purchase order mailed, or otherwise furnished, to the successful Bidder within the time for acceptance specified results in a binding contract without further action by either party. The contract shall be interpreted, construed and given effect in all respects according to the laws of the State of California.
- 5. Patent indemnity:** Vendors who do business with the County shall hold the County of Alameda, its officers, agents and employees, harmless from liability of an nature or kind, including cost and expenses, for infringement or use of any patent, copyright or other proprietary right, secret process, patented or unpatented invention, article or appliance furnished or used in connection with the contract or purchase order.
- 6. Samples:** Samples of items, when required, shall be furnished free of expense to the County and if not destroyed by test may upon request (made when the sample is furnished), be returned at the Bidder's expense.
- 7. Rights and remedies of County for default:** (a) In the event any item furnished by Contractor in the performance of the contract or purchase order should fail to conform to the specifications therefore or to the sample submitted by Contractor with its bid, the County may reject the same, and it shall thereupon become the duty of Contractor to reclaim and remove the same forthwith, without expense to the County, and immediately to replace all such rejected items with others conforming to such specifications or samples; provided that should Contractor fail, neglect or refuse so to do the County shall thereupon have the right purchase in the open market, in lieu thereof, a corresponding quantity of any such items and to deduct from any moneys due or that may there after come due to Contractor the difference between the prices named in the contract or purchase order and the actual cost thereof to the County. In the event that Contractor fails to make prompt delivery as specified for any item, the same conditions as to the rights of the County to purchase in the open market and to reimbursement set forth above shall apply, except when delivery is delayed by fire, strike, freight embargo, or Act of God or the government. (b) Cost of inspection or deliveries or offers for delivery, which do not meet specifications, shall be borne by the Contractor. (c) The rights and remedies of the County provided above shall not be exclusive and are in addition to any other rights and remedies provided by law or under the contract.
- 8. Discounts:** (a) Terms of less than ten (10) days for cash discount shall considered as net. (b) In connection with any discount offered, time shall be computed from date of complete, satisfactory delivery of the supplies, equipment or services specified in the RFP, or from date correct invoices are received by the County at the billing address specified, if the latter date is later than the date of delivery. Payment is deemed to be made, for the purpose of earning the discount, on the date of mailing the County warrant check.
- 9. California Government Code Section 4552:** In submitting a bid to a public purchasing body, the Bidder offers and agrees that if the bid is accepted, it shall assign to the purchasing body all rights, title, and interest in and to all causes of action it may have under Section 4 of the Clayton Act (15 U.S.C. Sec. 15) or under the Cartwright Act (Chapter 2, commencing with Section 16700, of Part 2 of Division 7 of the Business and Professions Code), arising from purchases of goods, materials, or services by the Bidder for sale to the purchasing body pursuant to the bid. Such assignment shall be made and become effective at the time the purchasing body tenders final payment to the Bidder.
- 10. No guarantee or warranty:** The County of Alameda makes no guarantee or warranty as to the condition, completeness or safety of any material or equipment that may be traded in on this order

The undersigned acknowledges receipt of above referenced RFP and/or Addenda and offers and agrees to furnish the articles and/or services specified on behalf of the Contractor indicated below, in accordance with the specifications, terms and conditions of this RFP and Bid Acknowledgement.

<b>Organization</b>		<b>What advertising source(s) made you aware of this RFP?</b>	
<b>Address</b>	<b>City/State Zip</b>	<b>Phone</b>	
<b>Printed Name</b>		<b>Title</b>	
<b>Signature</b>		<b>Date</b>	

**3. a. VENDOR MINIMUM QUALIFICATIONS FORM**

*EPSDT Expansion II. A. RFP #13-03*

*a. Describe Bidder's experience providing services to children and youth at least two years within the last five years.*

**3. b. VENDOR MINIMUM QUALIFICATIONS FORM**

*EPSDT Expansion II. A. RFP #13-03*

*b. Describe Bidder's experience billing to Short-Doyle Medi-Cal for at least two years within the last five years.*

**4. EXECUTIVE SUMMARY FORM**

*EPSDT Expansion II. A. RFP #13-03*

*Provide a synopsis of the highlights and benefits of the proposal.*

**5. a. ORGANIZATIONAL CAPACITY & REFERENCE**

*EPSDT Expansion II. A. RFP #13-03*

*In the original copy of Bidder's proposal include:*

- a. Fiscal Management Capacity: An updated copy Dun & Bradstreet Qualifier Report (within twelve months old) as ATTACHMENT 1A. Visit [www.dnb.com](http://www.dnb.com) for more information.*



## 5. b. ORGANIZATIONAL CAPACITY & REFERENCE

*EPSDT Expansion II. A. RFP #13-03*

### **EXHIBIT C: MINIMUM INSURANCE**

*In the original copy of Bidder's proposal submit proof of appropriate current insurance with the proposal as EXHIBIT C: Minimum Insurance.*

- b. Visit <http://www.acbhcs.org/providers/network/docs.htm> to locate the appropriate insurance document for your organization.
- For for-profit health care services, use Exhibit C-2c
- For Non-profit health care services, use Exhibit C-4

**5. c. ORGANIZATIONAL CAPACITY & REFERENCE**

*EPSDT Expansion II. A. RFP #13-03*

**EXHIBIT D1: CURRENT REFERENCES**

Organization Name			
Address			
City, State, Zip Code			
Contact Person			
Telephone Number		E Mail	
Service Provided			
Start Date of Service			

Organization Name			
Address			
City, State, Zip Code			
Contact Person			
Telephone Number		E Mail	
Service Provided			
Start Date of Service			

Organization Name			
Address			
City, State, Zip Code			
Contact Person			
Telephone Number		E Mail	
Service Provided			
Start Date of Service			

**6. a. i. BIDDER EXPERIENCE, ABILITY and PLAN**

*EPSDT Expansion II. A. RFP #13-03*

**EXHIBIT D2: FORMER REFERENCES**

Organization Name			
Address			
City, State, Zip Code			
Contact Person			
Telephone Number		E Mail	
Service Provided			
Start Date of Service		End Date of Service	

Organization Name			
Address			
City, State, Zip Code			
Contact Person			
Telephone Number		E Mail	
Service Provided			
Start Date of Service		End Date of Service	

Organization Name			
Address			
City, State, Zip Code			
Contact Person			
Telephone Number		E Mail	
Service Provided			
Start Date of Service		End Date of Service	

**6. b. i. BIDDER EXPERIENCE, ABILITY and PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***6. a. Target Population and Program Design***

***i. Provide an overview of the proposed program.***

**6. b. i. BIDDER EXPERIENCE, ABILITY and PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***6. a. Target Population and Program Design***

***i. Provide an overview of the proposed program.***

**6. b. i. BIDDER EXPERIENCE, ABILITY and PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***6. a. Target Population and Program Design***

***i. Provide an overview of the proposed program.***

**6. b. ii. BIDDER EXPERIENCE, ABILITY and PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***6. b. Experience with Target Population Needs and Service Delivery Approach***

***i. Describe Bidder's prior/current experience with the target population and any prior experience with the service delivery approach being proposed.***

**6. b. ii. BIDDER EXPERIENCE, ABILITY and PLAN**

*EPSDT Expansion II. A. RFP #13-03*

*ii. Describe what Bidder has learned from prior experience with the population and/or service delivery approach and if/how that has modified the organization's practices.*



**6. c. i-iii. BIDDER EXPERIENCE, ABILITY and PLAN**  
*EPSDT Expansion II. A. RFP #13-03*

*c. Planned Organizational Structure and Staffing*

- i. Provide Bidder's current organizational chart, describing logical oversight and linkages between the organization's current broader operating structure and services and include as ATTACHMENT 2A.*
- ii. Provide a second chart, describing logical linkages and oversight for the proposed program and include as ATTACHMENT 2B.*
- iii. Provide one page resumes for each currently employed staff as ATTACHMENT 3A. Provide one-page job descriptions for yet to be hired staff as ATTACHMENT 3B.*

**6. c. iv. BIDDER EXPERIENCE, ABILITY & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

*iv. Describe Bidder's staffing and supervisory infrastructure to manage and deliver the proposed program and plan to hire staff.*

**6. c. v. BIDDER EXPERIENCE, ABILITY & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

*v. Describe Bidder's experience with Medi-Cal billing maximization strategies.*

**6. d. i.-iii. BIDDER EXPERIENCE, ABILITY & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***d. Forming Partnerships and Collaboration***

***i. Describe Bidder's experience forming partnerships and/or collaborations, including challenges and solutions in forming and sustain partnerships.***

***ii. Describe how Bidder will connect with and/or engage parents, caregivers and families to ensure that client's service strategies or treatment plans are successful.***

***iii. Describe Bidder's plan to collaborate with other relevant partners, including names and purpose of organizations.***

**6. d. i.-iii. BIDDER EXPERIENCE, ABILITY & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***d. Forming Partnerships and Collaboration***

***i. Describe Bidder's experience forming partnerships and/or collaborations, including challenges and solutions in forming and sustain partnerships.***

***ii. Describe how Bidder will connect with and/or engage parents, caregivers and families to ensure that client's service strategies or treatment plans are successful.***

***iii. Describe Bidder's plan to collaborate with other relevant partners, including names and purpose of organizations.***

**6. e. i. BIDDER EXPERIENCE, ABILITY & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

***6. e. Ability to Track Data and Outcomes***

***i. Describe Bidder's current data systems, including capacity and procedures for collecting, analyzing and reporting data.***

**6. e. ii. BIDDER EXPERIENCE, ABILITY & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

*ii. Describe what data will be collected from the proposed program and how it will be used to monitor and improve performance.*

**EXHIBIT B-1: BUDGET WORKBOOK INSTRUCTIONS**

*a. Using the BHCS provided Budget Template complete and submit using the below instructions.*

**DIRECTIONS**

- Click 'Enable Content' to begin completing the Workbook
- All amounts are rounded to the nearest whole dollar
- Submit one Budget Workbook for each proposal
- **Fill in areas highlighted in yellow**
- Start-up costs do not apply to this RFP
  - Do not include start-up costs
- Click 'Reset Values' to clear the worksheet. Make sure all unwanted data is deleted
- Click 'Calculate' to calculate data
- Click 'Add Row' to add a row
- Complete all four worksheets (B-1; Prof & Spec Sv Detail; Misc. Detail; & Admin Detail)
- Print all five worksheets(B-1; Prof & Spec Sv Detail; Misc. Detail; Admin Detail; Billable Staff Hours)

<b>B-1 Funded Program Worksheet</b>
-------------------------------------

- Select Priority Program Category from the drop-down menu
  - If K thru 12 is selected
    - Select **red highlighted** School District
  - If Culturally & Linguistically Responsive Svc is selected
    - Select **red highlighted** Language

**SALARIES & WAGES**

- Enter Positions/Titles
- Direct Services
  - Select an "x" from the drop down menu for each position to indicate whether staff provides direct services to clients (i.e., billable services such as providing counseling, case management, medication support, etc.)
- Admin Staff
  - Select an "x" for each position to indicate whether staff provides administrative services
- Annualized Salary
  - Enter the salary paid to each staff person per year
- Total Cost
  - Enter the amount of each staff's salary that will be paid out of this RFP budget
- Full Time Equivalent (FTE)
  - The FTE will be automatically calculated based on the Annualized Salary and Total Cost
  - Examples:
    - If a person works 20 hours a week in project, this would be 50% FTE
    - If a person works a total of 37.5 hours per week, this is .94 FTE
- Percentage Employee Benefits & Taxes
  - Enter Employee Benefits and Taxes as a percentage

**OPERATING EXPENSES**

- Insert the amount to be spent in each line item, as needed
  - **Professional & Specialized Svcs**
  - **Miscellaneous**
  - **Admin**
    - Will be populated after Bidder fills out the appropriate tabs in the Budget Workbook



## 7. COST

### EPSDT Expansion II. A. RFP #13-03

#### **REVENUE**

- *List all revenue (or leveraged funds) that Bidder expects to receive from any source other than BHCS/Medical that will be applicable to this project such as fees, grants, etc.*

#### **SERVICE HOURS**

- *Enter Service Hours and Gross Cost for:*
  - *Case Management*
  - *Mental Health Services*
  - *Crisis Intervention*

#### **ERRORS-Bidder's Total Gross Costs and Service Hours Total Gross Costs should closely match**

- *If Bidder's Costs exceed the allocated amount, an error message will appear*
- *If Bidder's Total Gross Costs do not match Service Hours Total Gross Cost, an error message will appear*

<b>Prof &amp; Spec Sv Detail Worksheet</b>
--

- *Insert any Professional and Specialized Services required that are not listed under OPERATING EXPENSES*
  - *Provide adequate detail to justify the costs. This is Bidder's opportunity to justify costs.*

<b>Misc Detail Worksheet</b>
------------------------------

- *Insert any Miscellaneous costs required that are not listed under OPERATING EXPENSES*
  - *Provide adequate detail to justify the costs. This is Bidder's opportunity to justify costs.*

<b>Admin Detail Worksheet</b>
-------------------------------

- *Insert any Administrative costs required that are not listed under SALARIES & WAGES/OPERATING EXPENSES*
  - *Provide adequate detail to justify the costs. This is Bidder's opportunity to justify costs.*

<b>Billable Staff Hours Worksheet</b>
---------------------------------------

- *This worksheet is automatically populated by entries into the B-1*
- *Please include this in Bidder's proposal*

**7. b. COST**

*EPSDT Expansion II. A. RFP #13-03*

***7. b. Budget Narrative***

***Provide a narrative explanation for the program budget.***

**7. COST**

*EPSDT Expansion II. A. RFP #13-03*

***7. b. Budget Narrative***

***Provide a narrative explanation for the program budget.***

**8. a. IMPLEMENTATION SCHEDULE & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

*a. Include Bidder's Implementation Schedule and Plan.*

<b>Activity</b>	<b>Responsible Persons</b>	<b>Milestone/Measurement</b>	<b>Due Date</b>

**8. a. IMPLEMENTATION SCHEDULE & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

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**8. b. IMPLEMENTATION SCHEDULE & PLAN**

*EPSDT Expansion II. A. RFP #13-03*

*b. Identify and describe Bidder's strategies for mitigation of risks and barriers, which may adversely affect the program's implementation.*

<i>Barriers</i>	<i>Mitigation Strategies</i>

**EXHIBIT E: INTENTIONALLY OMITTED**

**EXHIBIT F: INTENTIONALLY OMITTED**

**EXHIBIT G: INTENTIONALLY OMITTED**

**EXHIBIT H: VENDOR FIRST SOURCE AGREEMENT**

*EPSDT Expansion II. A. RFP #13-03*

<b>ALCOLINK Vendor Number</b> <i>(if known)</i>		<b>SLEB Vendor Number</b>	
<b>Full Legal Name</b>			
<b>Doing Business As</b>			

**Type of Entity:**     Individual             Sole Proprietor     Partnership  
                                   Corporation             Tax-Exempted     Government or Trust

**Check the boxes that apply:**

Goods Only     Goods & Services     Rents/Leases         Legal Services  
 Rents/Leases paid to you as the agent     Medical Services     Non-Medical Services – *Describe*  
 Other-*Describe*

<b>Federal Tax ID Number</b> <i>(required)</i>		<b>P.O.Box/Street Address</b>	
<b>Vendor Contact's Name</b>			
<b>Vendor Contact's Phone:</b>		<b>Vendor Contact's Fax:</b>	
<b>Vendor Contact's Email:</b>			

*Please check all that apply:*

LOC  Local Vendor (Holds business license within Alameda County)  
 SML  Small Business (as defined by Small Business Administration)

I  American Indian or Alaskan Native (>50%)  
 A  Asian (>50%)  
 B  Black or African American (>50%)  
 F  Filipino (>50%)  
 H  Hispanic or Latino (>50%)  
 N  Native Hawaiian or other Pacific Islander (>50%)  
 W  White (>50%)

**Number of Entry Level Positions available through the life of the contract:**

**Number of other positions available through the life of the contract:**

*To be completed by County :*

<b>Contract #</b>	
<b>Contract Amount</b>	
<b>Contract Term</b>	



**Vendor** agrees to provide Alameda County (through East Bay Works and Social Services Agency), ten (10) working days to refer to Vendor, potential candidates to be considered by Vendor to fill any new or vacant positions that are necessary to fulfill their contractual obligations to the County, that Vendor has available during the life of the contract before advertising to the general public. Vendor shall also provide the County with specific job requirements for new or vacant positions. Vendor agrees to use its best efforts to fill its employment vacancies with candidates referred by County, but final decision of whether or not to offer employment, and the terms and conditions thereof, to the candidate(s) rest solely within the discretion of the Vendor.

**Alameda County** (through East Bay Works and Social Services Agency) agrees to only refer pre-screened qualified applicants, based on Contractor specifications, to Contractor for interviews for prospective employment by Vendor (see Incentives for Vendor Participation under Vendor/First Source Program located on the Small Local Emerging Business (SLEB) Website, <http://www.acgov.org/auditor/sleb/>).

If compliance with the First Source Program shall interfere with Vendor’s pre-existing labor agreements, recruiting practices, or shall otherwise obstruct Vendor’s ability to carry out the terms of the contract, Vendor shall provide to the County a written justification of non-compliance in the space provided below.

*(Company Name)*

\_\_\_\_\_  
*(Vendor Signature)*

\_\_\_\_\_  
*(Date)*

\_\_\_\_\_  
(East Bay Works / One-Stop Representative Signature)

\_\_\_\_\_  
(Date)

Justification of Non-Compliance:

List below requests for clarifications, exceptions and amendments, if any, to the RFP and its exhibits, and submit with your bid response.

The County is under no obligation to accept any exceptions and such exceptions may be a basis for bid disqualification.

Item No.	Reference To:		Description
	Page No.	Paragraph No.	
<b>Bidder Signature</b>			<b>Date</b>

**EXHIBIT J: INTENTIONALLY OMITTED**

**EXHIBIT K: INTENTIONALLY OMITTED**

**EXHIBIT L: INTENTIONALLY OMITTED**

## EXHIBIT M: PROPOSAL COMPLETENESS CHECKLIST

### *EPSDT Expansion II. A. RFP #13-03*

The below table provides an overview of the major components Bidders should include in their response to this RFP. For concrete prompts about the type of information to include in proposals, please see Section II. F. of the RFP.

Section/Requirement	Narrative Fillable Form Template	Required Section Attachments/Exhibits
<i>One original and seven copies of the Proposal ; a clearly marked electronic copy of the proposal</i>		
	<i>Title Page Form</i>	<i>N/A</i>
<i>Table of Contents (only needed if Fillable Forms Template is not used)</i>		
	<i>Cover Letter Form</i>	<i>Exhibit A: Bid Acknowledgement</i>
	<i>Vendor Minimum Qualifications Form</i>	<i>N/A</i>
	<i>Executive Summary Form</i>	<i>N/A</i>
<i>Organizational Capacity &amp; Reference</i>		<i>Attachment 1A: Dun and Bradstreet Qualifier Report (only in original)</i>
		<i>Exhibit C: Insurance Requirements(only in original)</i>
		<i>Exhibits D1 and D2: References(only in original)</i>
<i>Bidder Experience, Ability &amp; Plan Form</i>		<i>Attachment 2A: Agency Organizational Chart</i>
		<i>Attachment 2B: Proposed Program Chart</i>
		<i>Attachment 3A: Resumes</i>
		<i>Attachment 3B: Job Descriptions</i>
<i>Cost</i>	<i>Budget Narrative</i>	<i>Exhibit B-1: Budget Workbook</i>
<i>Implementation Schedule and Plan</i>	<i>Implementation Schedule &amp; Plan Form</i>	<i>N/A</i>
	<i>Mitigation of Risks and Barriers Form</i>	<i>N/A</i>
<i>Other Required Exhibits</i>		<i>Exhibit H: First Source Form</i>
		<i>Exhibit I: Exceptions/Clarifications/Amendments</i>
		<i>Exhibit N: Debarment and Suspension Certification</i>

**EXHIBIT N: DEBARMENT & SUSPENSION CERTIFICATION**

*EPSDT Expansion II. A. RFP #13-03*

The Bidder, under penalty of perjury, certifies that, except as noted below, Bidder, its Principal, and any named and unnamed subcontractor:

- Is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any federal agency;
- Has not been suspended, debarred, voluntarily excluded or determined ineligible by any federal agency within the past three years;
- Does not have a proposed debarment pending; and
- Has not been indicted, convicted, or had a civil judgment rendered against it by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three years.

If there are any exceptions to this certification, insert the exceptions in the following space.

Exceptions shall not necessarily result in denial of award, but shall be considered in determining Bidder responsibility. For any exception noted above, indicate below to whom it applies, initiating agency, and dates of action.

Notes: Providing false information may result in criminal prosecution or administrative sanctions. The above certification is part of the Proposal. Signing this Proposal on the signature portion thereof shall also constitute signature of this Certification.

**BIDDER:**

**PRINCIPAL:**

**TITLE:**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_