

**COUNTY OF ALAMEDA BEHAVIORAL HEALTH CARE SERVICES (BHCS)  
 ADDENDUM NO. 1  
 FOR  
 RFI NO. 14-01  
 FOR  
 LEVEL II SERVICES**

**NOTICE TO BIDDERS**

This county of alameda, BHCS RFI Addendum has been electronically issued to potential bidders via e-mail. E-mail addresses used are those in the county's small local emerging business (SLEB) vendor database or from other sources. If you have registered or are certified as a SLEB please ensure that the complete and accurate e-mail address is noted and kept updated in the SLEB vendor database. This RFI Addendum will also be posted on the BHCS website located at <http://www.acbhcs.org/Docs/docs.htm#Procurement> and the general services agency (GSA) contracting opportunities website located at & [http://www.acgov.org/gsa/purchasing/bid\\_content/contractopportunities.jsp](http://www.acgov.org/gsa/purchasing/bid_content/contractopportunities.jsp).

This document includes points that may not have been sufficiently emphasized in the Request for Interest (RFI). **The Addendum is the final word and response from the County.**

Changes are noted in **yellow highlight and bold** while deletions are noted in ~~yellow highlight and strikethrough~~.

**CORRECTIONS TO THE RFI**

**Page seven, 1. TITLE PAGE- LETTER OF INTEREST**

<b>Name of Executive Director or Equivalent</b>		<b>Title Signature</b>	
<b>Statement of Interest</b>			

## BIDDER QUESTIONS

**Q1. What does the Statement mean?**

A1. Provide a statement indicating your organization's interest in participating in the forums to discuss the program model for adults with Limited English Proficiency (LEP), Transition Age Youth (TAY) or adults living with co-occurring substance use and mental health disorders.

**Q2. Is Providers input effort only happening one time on November 19 for the LEP Spanish speaking group, or in series of meetings?**

A2. Yes, BHCS will host only one forum for the LEP Spanish and Cantonese and/or Mandarin and Vietnamese speaking priority populations on November 19, 2013. See page five: VI. CALENDAR OF EVENTS, Provider Input Meetings.

**Q3. For “years of experience billing Medi-cal”, does this refer to each licensed Provider we list?**

A3. No, list the number of years of experience billing Medi-cal for your organization.

**Q4. Should we separate our Medicare approved- and Medi-cal approved- clinicians?**

A4. Yes, separate and specify clinicians who can bill Medicare and/or Medi-cal.

**Q5. Will the adult ages 18-60 programs be in addition to the currently funded Level II time-limited case management teams?**

A5. No, BHCS plans to release an RFP in February 2014. See page five: VI. CALENDAR OF EVENTS.

**Q6. What is the approximate number of co-occurring clients to be served in the adults ages 18-60 programs?**

A6. BHCS will specify the characteristics of the population to be served in the RFP due to be released in February 2014. Providers are encouraged to provide comment during the planned forums that may inform BHCS in establishing the proportion of clients in the targeted population that may be expected to have co-occurring conditions.

**Q7. What are the desired outcomes and how will they be measured?**

A7. BHCS will specify the desired outcomes and measurements in the RFP due to be released in February. Providers are encouraged to comment on what may be useful outcomes and measurements at the planned forums.

**Q8. How will clients be assigned to the adult co-occurring program?**

A8. BHCS will specify the authorization process in the RFP due to be released in February. Providers are encouraged to list outreach strategies and methodologies to engage priority population with co-occurring conditions on page nine, question three.

**Q9: Will Level II services bill to Medi-cal and/or Medicare?**

A9: Yes, BHCS expects Service Provider to bill based on client's insurance coverage.

**Q10. Should we email a PDF version or a CD?**

A10: Bidders send an email of the response in PDF version to [aarroyo2@acbhcs.org](mailto:aarroyo2@acbhcs.org). See page six, INSTRUCTIONS.

**Q11. Can you clarify “denial/acceptance rates” in Question 2?**

A11. BHCS defines “denial/acceptance rates” as the minimum required compliance rate of 95 percent for children programs and 90 percent for adult programs to the standards for quality and claims review as described in the BHCS Quality Assurance Manual [http://www.acbhcs.org/providers/QA/qa\\_manual.htm](http://www.acbhcs.org/providers/QA/qa_manual.htm)

**Q12. What is the amount award for central Alameda County?**

A12. There is no money associated with this RFI. BHCS is seeking letters of interest from service providers wishing to participate in a process to provide feedback on a program model for adults with Limited English Proficiency (LEP), Transition Age Youth (TAY) and adults living with co-occurring substance use and mental health disorders. See page two, I. INTENT.

**Q13. Are the geographic areas specified correctly for the five priority populations?**

A13. Yes, BHCS is seeking providers who can provide insights on client and programmatic needs for the following populations:

1. TAY age 18 to 24 in north and central Alameda County;
2. Adults age 18 to 60 in north and central Alameda County;
3. Adults age 18 to 60 in south and east Alameda County;
4. Spanish speaking adults age 18 to 60 with LEP; and
5. Cantonese and/or Mandarin and Vietnamese speaking adults age 18 to 60 with LEP.