

**ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES (ACBH)
REQUEST FOR PROPOSAL (RFP) No. 22-04
SPECIFICATIONS, TERMS & CONDITIONS
FOR
SCHOOL-BASED BEHAVIORAL HEALTH (SBBH) SERVICES FOR CHARTER SCHOOLS
AND OAKLAND UNIFIED SCHOOL DISTRICT**

INFORMATIONAL MEETING/ BIDDERS' CONFERENCES

| Date | Time | Location |
|----------------------------|---------------------------|---|
| Friday July 15, 2022 | 10:00 am – 11:30 am | Online Webinar: https://meet.goto.com/MH_Fiscal_Team/biddersconferencerfp22-04sbbhforcharterschoolsando |
| Monday July 18, 2022 | 2:00 pm – 3:30 pm | Online Webinar: https://meet.goto.com/MH_Fiscal_Team/biddersconferenceno2rfpno22-04sbbhatcharterschools |

PROPOSALS DUE
by 2:00 pm on Thursday August 18, 2022
to
RFP No. 22-04 c/o Rachel Garcia via email: procurement@acgov.org
Proposals received after this date/time will NOT be accepted

Contact: Rachel Garcia
Phone: 510-383-1744

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I. STATEMENT OF WORK

A. INTENT

It is the intent of these specifications, terms, and conditions for Alameda County Behavioral Health Care Services (hereafter ACBH or County) to seek proposals to provide School Based Behavioral Health (SBBH) services to children and youth who attend the priority schools in Oakland and Alameda, have full scope Medi-Cal, and meet eligibility requirements for Specialty Mental Health Services

ACBH intends to award up to nine contracts to the Bidder(s) selected as the most responsible whose response conforms to the Request for Proposal (RFP) and meets the County requirements.

At this time, ACBH has allocated a total of \$4,425,000 in annual funding for SSBH services for Charter Schools and Oakland Unified School District (OUSD).

At this time, ACBH has allocated up to \$1,600,000 for SBBH services Category 1: Charter Schools Programs as follows:

| Category 1: Charter Schools Programs | | |
|--|--|-----------------------------|
| Program Name | Charter School/s | Maximum Award Amount |
| Alameda Charter School Program | Academy of Alameda | \$200,000.00 |
| Aspire Charter School Program | Aspire Triumph Technology Academy (K-5 th Grade) | \$200,000.00 |
| Lighthouse Charter School Program | Lighthouse Community Charter (Lower School: K-5 th Grades and Upper School: 6 th -12 th Grades) | \$400,000.00 |
| Education for Change TK-8 th Grades Program | Achieve Academy (K-5 th Grades) and Lazear Charter Academy (TK-8) | \$400,000.00 |
| Education for Change K-5 th Grades Program | Cox Academy (PreK-5 th Grades) and Learning Without Limits (K-5 th Grades) | \$400,000.00 |
| Category 1 Total Funding | | \$1,600,000.00 |

At this time, ACBH has allocated up to \$2,825,000.00 for SBBH services Category 2: OUSD Programs as follows:

| Category 2: OUSD Programs | | |
|---|--|-----------------------------|
| Program Name | School Name | Maximum Award Amount |
| OUSD North and Central Elementary Program | Piedmont and Allendale | \$725,000.00 |
| OUSD East Region Elementary Group 1 | Franklin Elementary and Oakland Academy of Knowledge | \$725,000.00 |

| | | |
|----------------------------------|--|-----------------------|
| OUSD Maddison Park Program | Maddison Park Academy (Lower Grades: K-5 th and Upper Grades: 6 th -12 th Grades) | \$725,000.00 |
| OUSD East Region Program Group 2 | Markham and Burkhalter Elementary | \$650,000.00 |
| Category 2 Total Funding | | \$2,825,000.00 |

ACBH will administer separate competitive processes for each program under this RFP. **Bidders may submit proposals for no more than two programs per Category.** Bidders may submit applications to apply for up to two programs in Category 1 and up to two programs in Category 2 for a maximum amount of four programs in total. **Bidders must submit a separate proposal for each program they are applying for.**

Any contracts that result from this RFP process will be prorated for the fiscal year at the contract start date and will be reimbursed on a rate basis for services that are billed to Medi-Cal.

Proposals shall form the basis for any subsequent awarded contract. Staffing levels and operating costs must accurately reflect the Bidder's costs for the program. ACBH reserves the right to dissolve a contract, or contracted program, if/when awarded Contractor materially alters staff, budgets, deliverables and outcomes any time after the contract award.

ACBH does not discriminate against particular Bidders that serve high-risk populations or specialize in conditions that require costly treatment.¹ The County is not obligated to award any contract as a result of this RFP process. The County may, but is not obligated to, renew any awarded contracted program. Any renewal of an awarded contracted program shall be contingent on the availability of funds, awarded Contractor's performance, and continued prioritization of the activities and priority populations as defined and determined by ACBH.

B. BACKGROUND

In 2009, to better partner with Alameda County school districts and Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit requirements, the County created a shared model and approach to SBBH services. EPSDT allows for periodic screenings to determine health care needs. Treatment services are then provided based on the identified health care need and diagnosis. EPSDT services include all services covered by Medi-Cal. EPSDT is used under the Specialty Mental Health designation for Mental Health and Substance Use Disorder Services which allows individuals under the age of 21 to receive Mental Health (MH) and Substance Use Disorder (SUD) services and supports covered under their Medi-Cal health insurance plan.

¹ To comply with 42 CFR § 438.214 as a Prepaid Inpatient Health Plan (PIHP).

ACBH released a procurement process in Fiscal Year 2011/2012 for Charter Schools in Alameda County to have SBBH programs. Since that time, some charter schools have permanently closed while others have grown and changed. Because of the extended amount of time since the last procurement process for these programs, ACBH is releasing this RFP to include the remaining charter schools as well as additional schools not included in the first round. The schools in Category 2, the Oakland Unified School District were a part of an emergency contracting process in 2019 due to the closure of a former SBBH community-based provider at which time ACBH under emergency contracting process, transferred these programs over to various providers so that services to children and youth would not be suddenly stopped. The programs under this emergency transfer are the programs included in Category 2.

Within the California Advancing and Innovating Medi-Cal (CalAIM) initiative, the California Department of Health Care Services (DHCS) aims to design a coherent plan to address beneficiaries' needs across the continuum of care to ensure that all Medi-Cal beneficiaries receive coordinated services in support of improved health outcomes. The goal is to ensure access to the right care in the right place at the right time.

For individuals under 21 years of age, services are “medically necessary” or a “medical necessity” if the services meets the standards set forth in Section 1396d(r)(5) of Title 42 of the United States Code. This section requires provision of all Medicaid-coverable services necessary to correct or ameliorate a mental illness or condition discovered by a screening service, whether or not such services are covered under the State plan.

C. SCOPE/PURPOSE

The SBBH program provides outpatient mental health services to children and youth attending schools. SBBH services are designed to place clinical staff at schools to provide on-site clinical services to students who meet specialty mental health criteria under the Medi-Cal regulations for EPSDT. SBBH services aim to provide accessible clinical treatment and mental health interventions to reduce levels of acuity, children and youth experiencing emotional distress, and mental health challenges. SBBH services are further designed to include appropriate school district faculty and staff in the ongoing goal of school-linked health services as part of the continuum of care at school sites. SBBH services also provide youth and families with coping strategies that improve overall health and wellness.

The goals of SBBH services are to:

- Enhance client’s mental health status, positive coping strategies, and life skills;
- Increase client’s ability to actively participate and engage in school, home, and other community settings;
- Increase parent and/or caregiver’s ability to support clients by encouraging participation in the client’s treatment; and
- Improve client’s ability to cultivate and/or maintain positive relationships with peers and adults.

D. BIDDER MINIMUM QUALIFICATIONS

To be eligible to participate in this RFP, Bidders must successfully demonstrate in their proposal how they meet the following Bidder Minimum Qualifications:

- At least two years of experience working with children and youth; and
- At least one year of experience billing Medi-Cal through a County or Managed Care Plan in the past three years.

Proposals that exceed the contract maximum amount and/ or are unreasonable and/or unrealistic in terms of budget, as solely determined by ACBH, shall be disqualified from moving forward in the evaluation process.

ACBH shall disqualify proposals submitted with subcontractors performing any portion of the services described in this RFP.

Bidders are eligible to participate in the RFP process if they meet the Bidder Minimum Qualifications. ACBH will disqualify proposals that do not demonstrate that Bidder meets the specified Bidder Minimum Qualifications, and these disqualified proposals will not be evaluated by the Evaluation Panel and will not be eligible for contract award under this RFP. ACBH has the right to accept all or part of the proposed program model at its discretion.

E. SPECIFIC REQUIREMENTS

The scope of work for awarded contracts from this RFP will include conformance with all of the following throughout the program period, as needed:

- Provide outpatient services including:
 - Mental Health Services, including but not limited to Plan Development and Family Engagement
 - Case Management/ Brokerage
 - Crisis Intervention
- Participate in the Coordination of Services Team (COST) and school process meetings, as needed, and collaborate with school-based health centers, as applicable;
- Conduct ongoing monitoring to ensure that staff who are providing clinical services maintain a valid license with no restrictions;
- Plan for and implement continuous training and quality improvement, including but not limited to cultural and linguistic responsiveness;
- Promote cultural competence and multi-culturalism using Culturally and Linguistically Appropriate Services (CLAS)²;
- Data entry in a timely manner, as instructed, using the County's electronic information management and claiming system (currently INSYST) and client progress notes;

² <https://www.thinkculturalhealth.hhs.gov/pdfs/EnhancedNationalCLASStandards.pdf>

- Complete trainings required to access and input data into County's electronic information management and claiming system as needed;
- Complete other trainings as required or requested by the County;
- Timely administration and update of age-appropriate Child Assessment of Needs and Strengths (CANS) and other assessments or tools as required for all clients;
- Comply with school district requirements and agreements; and
- Adhere to Medi-Cal, state and federal requirements, including but not limited to those outlined in the following section:

1. Medi-Cal Billing, Clinical and Quality Assurance Requirements

To implement these services successfully, providers shall demonstrate and have the capability to conduct all of the activities listed below. Bidders agree by submittal of proposal(s) that they will comply with all of the following if awarded a contract(s):

- Independently adhere to all Medi-Cal documentation standards, including, but not limited to, Assessments, Treatment Plans and Progress Notes that are in compliance with Medi-Cal standards as set forth by Federal and State regulation, as well as the policies of ACBHCS "Clinical Documentation Standards" manual which may be found here: http://www.acbhcs.org/providers/QA/docs/ga_manual/7-1_CLINICAL_DOCUMENTATION_STANDARDS.pdf
- Attend all required scope of practice training and documentation training activities in order to appropriately and successfully bill to Medi-Cal.
- As required, Obtain and maintain a valid fire clearance from the local fire department for the program site address OR obtain a copy of the current and valid fire clearance from the program location's property manager/owner. Upon expiration of a fire clearance, contractor shall send a copy of a new fire clearance certificate to the ACBH Quality Assurance (QA) Office. Awarded Contractor understands that they may not operate at a site without a valid fire clearance.
- Meet minimum requirements for a program site as set forth in CCR, Title 9, Section 1810.435. All contracted program sites must be certified in accordance with the mental health Medi-Cal Program Site Certification Protocol. Contractors are responsible for preparing all materials required for a Medi-Cal Program Site Certification: http://www.acbhcs.org/providers/network/docs/2013/MH_Medi-cal_Program_Certification_protocol.pdf
- Attend all required ACBH sponsored trainings related to start-up and maintenance of Medi-Cal billing – see the full list of requirements in Appendix B: Medi-Cal Requirements for Service Providers and Appendix C: Setting-up Services at a New Mental Health Site;
- Follow all ACBH policies and procedures in the ACBH QA Manual: http://www.acbhcs.org/providers/QA/ga_manual.htm
- Attend the monthly ACBH Clinical Quality Review Team (CQRT) group meetings for the first year of contract regardless of whether Bidder is already billing Short Doyle Medi-Cal. ACBH QA office will determine if an awarded Contractor will be exempt

from CQRT requirements. CQRT requires one Licensed Practitioner of the Healing Arts (LPHA) to attend for every seven charts that are reviewed. Find the updated CQRT manual here:

http://www.acbhcs.org/providers/QA/docs/qa_manual/9-1_CQRT_MANUAL.pdf

See the QA website for more information: <http://www.acbhcs.org/providers/QA/QA.htm>

2. Credentialing, Re-credentialing and Continuous Monitoring of Licenses

Contractor shall be responsible for verifying the credentials and licensing of their staff and employees as contained in ACBH, state and federal requirements. Waivers for certain clinical staff are required in order to bill Medi-Cal and Contractor shall familiarize themselves and comply with the waiver requirements posted in the ACBH QA Manual. ACBH has the right to request Contractors credential log or records and Contractor's personnel record files to verify Contractor's credentialing process and applicable credentials of staff.

ACBH does not discriminate against particular Bidders that serve high-risk populations or specialize in conditions that require costly treatment. Further, the County does not discriminate in the selection, reimbursement, or indemnification of any provider who is acting within the scope of his or her license or certification under applicable state law, solely on the basis of that license or certification.³

3. Office of the Inspector General (OIG) and Other Exclusion List Background Checks – Monitoring, Oversight and Reporting

In accordance with ACBH's Policy and Procedure #1703—2-1 on OIG and Exclusion List Background Checks – Monitoring, Oversight and Reporting and prior to Alameda County Board of Supervisors Approval and contract execution, ACBH and/or Contractor will check and verify all licensed staff for:

- NPPES
- Licenses verified no restrictions
- OIG/LEIE database
- SAM/EPLS data base
- Medi-Cal and S&I database
- Social Security Death Master File

Contractor shall submit an attestation that they have verified the above items for all staff, as required. If there are issues, ACBH may not contract with the awarded organization.

More details regarding this policy and procedure can be found on ACBH QA website:

³ In compliance with 42 CFR § 438.214 as a Prepaid Inpatient Health Plan (PIHP).

<http://www.acbhcs.org/providers/QA/memos.htm>

4. Provider Enrollment

Upon contract award, and every three years following, providers will be screened for the following requirements:

- Verification of provider specific enrollment requirements (accreditation, surety bonds etc.)
- Social security administration
- National plan and provider enumeration system
- National provider identifier (NPI) database
- Taxpayer identification number
- Death of individual practitioners (Social security administration death master file including all eligible professionals)
- Criminal background checks
- Unscheduled or unannounced site visits (pre and post enrollment)

At minimum, on a monthly basis, providers will be rescreened to validate:

- State license validation, debarment, sanctions and disciplinary actions
- Out-of-State exclusion lists
- Health and Human Services OIG exclusion list
- Checks against the General Service Administration's Excluded Parties List System
- Checks against the Medicare Suspended and Ineligible Provider List

The County may terminate or deny enrollment if a provider or any person with 5 percent or greater ownership interest:

- Has been convicted of criminal offense in Medicare, Medicaid or CHIP within the past 10 years,
- Failed to comply with the new screening requirements (including background checks or failure to cooperate with required site visits),
- Did not submit accurate and timely information,
- Terminated from any Medicare, Medicaid or CHIP program after January 1, 2011,
- Falsifies information, and/or
- The County cannot verify enrollment information.

F. BIDDER EXPERIENCE, ABILITY AND PLAN

1. *Understanding of and Experience with Priority Population Needs*

The priority population for SBBH Charter and OUSD Schools includes children and youth who have full scope Medi-Cal as their primary health insurance and are eligible under the EPSDT benefit for specialty mental health services. This includes children and youth, ages zero to 21 years old from the school sites and/ or surrounding communities. The priority population may be experiencing emotional and psychological distress and/or trauma, and are likely to benefit from mental health treatment and interventions to support their overall health and wellness. This includes children and youth at program school sites who have

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been involved in the child welfare, foster care and/or juvenile probation systems, are experiencing homelessness or are housing insecure (including both sheltered and unsheltered homelessness). Unaccompanied immigrant youth and members of the Lesbian Gay Bisexual Transgender Queer and/or Questioning Intersex Asexual (LGBTQIA+) community are also included in the priority population.

Each Charter School organization and public-school site in OUSD has a diverse student population and various needs including the requirement for culturally appropriate and culturally affirming clinical services and practices.

SBBH services shall target children and/or youth as described above, and their families. Each school has unique populations and needs, Bidders are encouraged to review the site-specific information when submitting their bid/s.

Category 1: Charter Schools Programs

| Charter School | School Wide Demographics |
|--|--|
| Academy of Alameda Charter Schools Academy of Alameda Elementary: Kindergarten – Grade 5 Academy of Alameda: Grades 6-8 | Academy of Alameda Elementary ⁴ : Total Enrollment: 298 students <ul style="list-style-type: none"> • African American or Black: 12% • Asian: 22.5% • Filipino: 7.7% • Latino/a or Hispanic: 20.5% • Multiracial: 13.8% • Native Hawaiian or Pacific Islander: 0.7% • White/ Caucasian: 20.1% Academy of Alameda ⁵ : Total Enrollment: 476 students <ul style="list-style-type: none"> • African American or Black: 14.3% • American Indian or Alaska Native: 0.2% • Asian: 26.3% • Filipino: 4.8% • Latino/a or Hispanic: 17.9% • Multi-racial: 14.7% • Native Hawaiian or Pacific Islander: 0.4% • White/ Caucasian: 19.3% |
| Aspire Triumph Technology Academy | Total enrollment: 284 students ⁶ <ul style="list-style-type: none"> • African American or Black: 64% |

⁴ Academy of Alameda Elementary School data from School Year 2019-2020: [1920_ES_SARC.pdf | Powered by Box](#)

⁵ Academy of Alameda data from School Year 2019-2020: [1920_MS_SARC.pdf | Powered by Box](#)

⁶ Aspire Triumph Academy demographic information source: <https://aspirepublicschools.org/locations/bay-area/aspire-triumph-technology-academy/>

| Charter School | School Wide Demographics |
|---|--|
| Grades: TK- Grade 5 | <ul style="list-style-type: none"> • Asian-American: 1% • Latino/a or Hispanic: 32% • Multi-racial: 1% • Not Available: 1% • Pacific Islander: 1% • White/ Caucasian: 1% |
| <p>Lighthouse Charter School</p> <p>Lighthouse Community Charter Lower School: Kindergarten – Grade 9</p> <p>Lighthouse Community High School: Grades 9 – 12</p> | <p>Lighthouse Community Charter Kindergarten – Grade 9: Total Enrollment: 645 students</p> <ul style="list-style-type: none"> • Female: 51.2% and Male: 48.8% • African American or Black: 18.4% • Asian: 0.5% • Filipino: 1.2% • Latino/a or Hispanic: 71.9% • Native Hawaiian or Pacific Islander: 1.2% • Multi-racial: 3.6% • White/ Caucasian: 0.6% <p>Lighthouse Community High School: Total Enrollment: 315 students⁷</p> <ul style="list-style-type: none"> • Female: 53.3% and Male: 46.7% • African American or Black: 9.5% • Asian: 1.6% • Filipino: 0.3% • Latino/a or Hispanic: 82.9% • Multi-racial: 1% • White/ Caucasian: 4.3% |
| <p>Education for Change TK-8th Grade</p> <p>Achieve Academy: Kindergarten - Grade 5</p> <p>Lazear Charter Academy: Kindergarten - Grade 8</p> | <p>Achieve Academy⁸: Total Enrollment: 607 students</p> <ul style="list-style-type: none"> • Female: 50.7% and Male: 49.3% • African American or Black: 3.8% • American Indian or Alaska Native: 0.2% • Asian: 2% • Filipino: 0.8% • Latino/a or Hispanic: 88.5% • Native Hawaiian or Pacific Islander: 0.2% • Multi-racial: 1.2% |

⁷ Lighthouse Community Charter High School data from 2020-2021: https://lighthousecharter.org/wp-content/uploads/2022/01/2021_School_Accountability_Report_Card_Lighthouse_Community_Charter_High_School_20220124.pdf

⁸ Achieve Academy data from 2020-2021 School Year: https://www.efcps.org/files/ugd/88f0d1_f152989f8f594dc8acd3e455faded3fd.pdf

| Charter School | School Wide Demographics |
|--|---|
| | <ul style="list-style-type: none"> • White/ Caucasian: 3.5% <p>Lazear Charter Academy⁹: Total enrollment: 485 students</p> <ul style="list-style-type: none"> • Female: 55.1% and Male: 44.9% • African American or Black: 4.3% • American Indian or Alaska Native: 0.8% • Asian: 1.4% • Filipino: 1% • Latino or Hispanic: 89.5% • Multi-racial: 1% • White/ Caucasian: 1.9% |
| <p>Education for Change K-Grade 5</p> <p>Cox Academy: PreK – Grade 5</p> <p>Learning without Limits: Kindergarten – Grade 5</p> | <p>Cox Academy: Total Enrollment: 581 students¹⁰</p> <ul style="list-style-type: none"> • Female: 51.3% and Male: 48.7% • African American or Black: 17% • American Indian or Alaska Native: 0.3% • Asian: 1% • Filipino: 0.5% • Latino/a or Hispanic: 75.6% • Native Hawaiian or Pacific Islander: 3.8% • Multi-racial: 1.7% <p>Learning without Limits: Total enrollment: 411 students¹¹</p> <ul style="list-style-type: none"> • Female: 54% and Male: 46% • African American or Black: 13.6% • Asian: 6.8% • Filipino: 0.5% • Latino/a or Hispanic: 75.7% • Native Hawaiian or Pacific Islander: 1.2% • Multi-racial: 1.5% • White/ Caucasian: 0.7% |

Category 2: OUSD Programs

⁹ Lazear Charter Academy data from 2020-2021 School year:

https://www.efcps.org/_files/ugd/88f0d1_765f213330f144d4bbaf16525306a622.pdf

¹⁰ Cox Academy data from 2020-2021:

https://www.efcps.org/_files/ugd/88f0d1_5335a503a4d44f42ad858eaa7e72f80e.pdf

¹¹ Learning without Limits data from 2020-2021:

https://www.efcps.org/_files/ugd/88f0d1_6f24150e929046599d6a66008ff36e07.pdf

OUSD has an overall enrollment of approximately 37,000 students. OUSD has a diverse student body with various needs. Nearly 75% of OUSD students are eligible for free and reduced lunch and 30% of students are classified as English Language Learners.

| School | Demographics |
|--|--|
| <p>OUSD North and Central Elementary</p> <p>Piedmont Elementary: Transitional Kindergarten (TK) – Grade 5</p> <p>Allendale Elementary: Kindergarten – Grade 5</p> | <p>Piedmont Elementary: Total Enrollment: 339 students¹²</p> <ul style="list-style-type: none"> • Female: 46.6%, Male:53.1%, Non-Binary: 0.3% • African American or Black: 46% • American Indian and Alaska Native: 0.9% • Asian: 6.8% • Filipino: 2.1% • Latino/a or Hispanic: 19.2% • Multi-racial: 11.5% • White/ Caucasian: 8.6% <p>Allendale Elementary: Total Enrollment: 354 students¹³</p> <ul style="list-style-type: none"> • Female: 44.4% and Male: 55.6% • African American or Black: 27.7% • Asian: 13.3% • Filipino: 2.8% • Latino/a or Hispanic: 44.6% • Native Hawaiian or Pacific Islander: 2.8% • Multi-racial: 3.1% • White/ Caucasian: 3.1% |
| <p>OUSD East Region Elementary</p> <p>Franklin Elementary: Kindergarten – Grade 5</p> <p>Oakland Academy of Knowledge: Kindergarten – Grade 6</p> | <p>Franklin Elementary: Total Enrollment: 586 students¹⁴</p> <ul style="list-style-type: none"> • Female: 45.4% and Male: 54.6% • African American or Black: 12.3% • American Indian or Alaska Native: 0.2% • Asian: 53.8% • Filipino: 1.4% • Latino/a or Hispanic: 21% • Native Hawaiian or Pacific Islander: 0.9% • Multi-racial: 4.8% • White/ Caucasian: 2.6% <p>Oakland Academy of Knowledge:</p> |

¹² Piedmont Elementary data from 2020-2021: <https://sarconline.org/public/print/01612596002117/2020-2021>

¹³ Allendale Elementary School data from 2020-2021: <https://sarconline.org/public/print/01612596002117/2020-2021>

¹⁴ Franklin Elementary School data from 2020-2021: <https://sarconline.org/public/print/01612596001820/2020-2021>

| School | Demographics |
|--|---|
| | Total Enrollment: 273 Students ¹⁵ <ul style="list-style-type: none"> • Female: 45.8% and Male: 54.2% • African American or Black: 45.8% • Asian: 3.7% • Filipino: 0.4% • Latino/a or Hispanic: 28.9% • Native Hawaiian or Pacific Islander: 2.6% • Multi-Racial: 6.6% • White/ Caucasian: 3.7% |
| OUSD Maddison Park Program Madison Park Academy Lower: TK – Grade 5 Madison Park Academy Upper: Grades 6-12 | Madison Park Academy Lower: Total Enrollment: 267 students ¹⁶ <ul style="list-style-type: none"> • Female: 46.4% and Male: 53.6% • African American or Black: 26.2% • American Indian or Alaska Native: 0.4% • Latino/a or Hispanic: 58.1% • Native Hawaiian or Pacific Islander: 9% • Multi-racial: 1.5% • White/ Caucasian: 1.1% Madison Park Academy: Total Enrollment: 754 students ¹⁷ <ul style="list-style-type: none"> • Female: 46.8% and Male: 53.2% • African American or Black: 15.5% • American Indian or Alaska Native: 0.1% • Asian: 0.1% • Filipino: 0.3% • Latino/a or Hispanic: 78.1% • Native Hawaiian or Pacific Islander: 2.9% • Multi-racial: 0.4% • White/ Caucasian: 0.7% |
| OUSD East Region Program Markham Elementary: Kindergarten – Grade 5 | Markham Elementary: Total Enrollment: 269 students ¹⁸ <ul style="list-style-type: none"> • Female: 48.7% and Male: 51.3% • African American or Black: 21.9% • Asian: 0.7% |

¹⁵ Oakland Academy of Knowledge data from 2020-2021: <https://sarconline.org/public/print/01612596001713/2020-2021>

¹⁶ Madison Park Academy Lower TK – 5 2020-2021 data: <https://sarconline.org/public/print/01612596002182/2020-2021>

¹⁷ Madison Park Academy Upper 2020-2021 data: <https://sarconline.org/public/print/01612596066450/2020-2021>

¹⁸ Markham Elementary School 2020-2021 data: <https://sarconline.org/public/print/01612596002059/2020-2021>

| School | Demographics |
|--|---|
| Burkhalter Elementary: Kindergarten – Grade 5 | <ul style="list-style-type: none"> • Latino/a or Hispanic: 73.2% • Native Hawaiian or Pacific Islander: 0.7% • Multi-racial: 2.2% • White/ Caucasian: 0.4% <p>Burkhalter Elementary: Total enrollments: 193 students¹⁹</p> <ul style="list-style-type: none"> • Female: 50.3% and Male: 49.7% • African American or Black: 62.7% • American Indian or Alaska Native: 0.5% • Filipino: 0.5% • Latino/a or Hispanic: 18.1% • Native Hawaiian or Pacific Islander: 2.1% • Multi-racial: 5.2% • White/ Caucasian: 3.6% |

Services shall be culturally and linguistically responsive to the program area/s applying for. Successful Bidders will demonstrate knowledge, experience, and understanding of the needs, issues and challenges faced by the priority population. Bidders should identify strategies to address barriers faced by clients and demonstrate experience in supporting the priority population. The awarded Contractor(s) shall also demonstrate the cultural competency required to successfully serve the priority population.

2. Service Delivery Approach

The SBBH program model includes clinical assessments; individual, group, and family therapy; case management; plan development; collateral services; and rehabilitation services. Each service modality is intended to be used across the service continuum as needed for meeting goals and objectives of client treatment.

The average length of stay in the SBBH program ranges from six to twelve months and services are offered twelve months a year including when a school is in or not in session. Bidders shall propose their plan for offering services year-round.

Clinicians in SBBH programs provide initial clinical assessments which includes comprehensive reviews of client need resulting in a supporting clinical diagnosis for treatment planning. Client plans are developed with appropriate goals and objectives with interventions that target the clinical needs. Bidders with capacity to provide psychiatry and medication support shall propose their plan for incorporating these services in their proposed SBBH program. Treatment and service plans may include family (parent/s

¹⁹ Burkhalter Elementary school 2020-2021 data: <https://sarconline.org/public/print/01612596001689/2020-2021>

and/or guardian/s) engagement. Bidders will propose their plans for engaging family members in treatment.

The awarded Contractors shall provide in person and face-to-face services at school sites, in home, or in other field-based or community settings during the school day, after hours during evenings and weekends as needed. As needed, clinical services may also be delivered using virtual platforms or through telephonic modalities as needed for appropriate client care, although the primary service modality is face to face services. Bidders shall propose how they intend to deliver SBBH services.

The awarded Contractors shall participate in the COST meetings and/or process and receive referrals for mental health services. Referrals to the COST or triage team can be made by the students themselves, a parent/ guardian, or school site staff. The awarded Contractors are expected to work closely with the school site staff or referring party to contact the parent and/or guardian, as appropriate, who may or may not be aware of the clinical referrals.

Children and youth in out-of-home placements through Child Welfare and/or Probation may require additional coordination with their out-of-home providers (foster parent, short term residential treatment program, etc.) to coordinate adequate supports for the school day. As available and appropriate, the awarded Contractors may serve children and youth referrals from youth in nearby schools or neighborhoods referred through the ACBH Acute Crisis Care and Evaluation for System-wide Services (ACCESS). The awarded Contractors shall prioritize referrals for students enrolled in the schools awarded from this procurement process.

The EPSDT Medi-Cal programs for children and youth include assisting youth to access a number of additional services they may qualify to receive. ACBH will provide information on screening and referring children and youth to additional services and resources and State mandated tools in alignment with CalAIM. Bidders shall propose strategies for maintaining compliance and communication of screening and referring children and youth to additional services and resources as needed.

Awarded Contractors must conform with Medi-Cal eligibility prior to delivering services. Only a parent or guardian can authorize treatment services unless minor consent²⁰ is used or there is a Child Welfare Worker of Court ordered advocate or another intermediary

²⁰ For Medi-Cal services, a minor, who is 12 years old or older, may consent to mental health treatment or counseling services on an outpatient basis, or to residential shelter services, if both:

- (1) The minor, in the opinion of the attending professional person, is mature enough to participate intelligently in the outpatient services or residential shelter services AND
- (2) The minor (A) would present a danger or serious physical or mental harm to self or to others without the mental health treatment or counseling or residential shelter services, or (B) is the alleged victim of incest or child abuse.

Parent maintains right to consent for care unless court order specifically states otherwise. If the parent maintains rights, the provider should make attempts to obtain consent from the parent.

involved. Bidders shall describe the plan for providing follow-up resources or services, and the coordination, if appropriate, with client's family members or supports.

Evidence Based Practice (EBP) models for clinical services are encouraged but are not required. Bidders shall propose any Evidence Based Practices (EBPs), promising practices, and/or community defined approaches, and how they will support the goals of the programs.

3. Planned Staffing and Organizational Capacity

Bidders shall include a staffing structure that is well matched to program services. Bidders shall demonstrate how their current and planned organizational infrastructure will successfully provide SBBH services.

SBBH clinical teams are expected to deliver on-site clinical services and interventions. Clinical teams may include Licensed Practitioners of the Healing Arts (LPHAs) as well as adjunct staff, peer specialists and/or family partners, behavioral intervention specialists, and/or a combination of appropriate credentialed staff²¹. Bidders may propose licensed and/or unlicensed clinical staff; however, services must include a licensed clinical supervisor per clinical services and documentation standards. Bidders will propose their clinical staffing model and provide rationale.

Bidders will be evaluated based on their description of their staffing plan and organizational capacity to provide the services described in this RFP. Services shall be provided by an organization with thoughtful and appropriate operations in terms of capacity, infrastructure, staffing and hiring, with staffing practices that emphasize the ability to relate to and engage with the priority population and with their parents/guardians.

Appropriate infrastructure, staffing and hiring includes:

- Plan for hiring, training, and supporting program staff;
- Plan for providing appropriate and regular clinical supervision to program staff;
- Organizational capacity to support clients in meeting their treatment goals;
- Organizational capacity to enter and track data in the County's electronic information management (currently Clinician's Gateway) or utilize bidder's Electronic Health Record (EHR) system; and
- Organizational capacity or plan to build organizational capacity to meet Federal, State, and Medi-Cal billing, clinical, and quality assurance requirements including adjusting services or practices as needed to meet CalAIM requirements.

Bidders must also include in their proposal their overall organizational chart and where the program will sit within the agency that demonstrates the agency's infrastructure to ensure

²¹ Bidders are encouraged to review the ACBH Scope of Practice grid for information on staffing scopes: [ACBHCS Guidelines Scope Practice Credentialing Provide Specialty MH Services.pdf](#)

there is necessary oversight, supervision, and support to comply with the program requirements.

4. Forming Partnerships and Collaboration

The awarded Contractors will be required to collaborate with other entities including school sites to deliver services. SBBH clinical teams will work with the school sites to establish confidential spaces to deliver services when SBBH staff are onsite. Bidders shall demonstrate their capacity to form meaningful partnerships with school personnel and be cognizant of and adaptable to the cultures and processes within schools. Bidders shall demonstrate experience providing school-based or place-based collaborations, this may include afterschool programs, providing services or collaborating with Boys and Girls Clubs, etc.

Proposals shall include considerations for initial and ongoing family engagement in relation to clinical services for children and youth. Bidders shall also include communication strategies for ongoing effective communication with school site and school district partners.

To strengthen service linkages, the awarded Contractor(s) will use existing partnerships and identify additional collaborative partnerships. Bidders shall demonstrate their experience with and capability to form partnerships and collaborations to implement this program successfully. Bidders will propose their plan for building on existing and establishing new partnerships to support clients in meeting their needs.

5. Ability to Track Data

The awarded Contractor(s) shall track data and outcomes for the purpose of reporting and for continuous quality improvement of services. Bidders may be required to report changes in CANS scoring for predetermined domains to report treatment progress.

ACBH reserves the right to determine and evaluate program measures and outcomes, and to work with the awarded Contractor(s) to alter their program and outcome measures in subsequent years.

Bidders will be evaluated based on their plan for meeting program outcomes as well as their ability to track client progress.

II. INSTRUCTIONS TO BIDDERS

A. COUNTY CONTRACTS

All contact during the competitive RFP process shall be through the RFP contact, only.

The ACBH website <https://www.acbhcs.org/providers/network/rfp.htm> and the General Services Agency (GSA) website <https://gsa.acgov.org/do-business-with-us/contracting-opportunities/> are the official notification and posting places for this RFP and any Addenda.

The evaluation phase of the competitive process shall begin upon receipt of proposals until contract award. Bidders shall not contact or lobby CSC/Evaluation Panelists during the evaluation process. Attempts by Bidders to contact CSC/Evaluation Panelists may result in disqualification of the Bidder's proposal.

All questions regarding these specifications, terms and conditions shall be submitted in writing, preferably via e-mail, as specified in the Calendar of Events to:

Rachel Garcia
1900 Embarcadero Cove, Suite 205
Oakland, CA 94606
Email: Rachel.Garcia2@acgov.org

B. CALENDAR OF EVENTS

| Event | Date/Location |
|-------------------------------------|---|
| Request for Proposals (RFP) Issued | Friday July 1, 2022 |
| Bidder's Written Questions Due | By 5:00 pm on the day of 2 nd Bidder's Conference – ACBH strongly encourages Bidders to submit written questions earlier. |
| 1 st Bidders' Conference | Friday July 15, 2022 10:00 am – 11:30 am Online Webinar: https://meet.goto.com/MH_Fiscal_Team/biddersconferencerfp22-04sbbhforcharterschoolsando |
| 2 nd Bidders' Conference | Monday July 18, 2022 2:00 pm – 3:30 pm Online Webinar: https://meet.goto.com/MH_Fiscal_Team/biddersconferenceno2rfpno22-04sbbhatcharterschools |
| Addendum Issued | Monday July 25, 2022 |
| Proposals Due | Thursday August 18, 2022 by 2:00pm |
| Review/Evaluation Period | Thursday August 18, 2022 – Tuesday October 4, 2022 |
| Oral Interviews (as needed) | Category 1: Monday October 3, 2022 Category 2: Tuesday October 4, 2022 |
| Award Recommendation Letters Issued | Tuesday October 11, 2022 |
| Board Agenda Date | June 2023 |
| Contract Start Date | July 1, 2023 |

Note: Award Recommendation, Board Agenda and Contract Start dates are approximate. Other dates are subject to change. Bidders will be notified of any changes via email. It is the responsibility of each Bidder to be familiar with all of the specifications, terms and conditions. By submission of a proposal, Bidder certifies that if awarded a contract Bidder shall make no claim against the County based upon ignorance of conditions or misunderstanding of the specifications.

C. SMALL LOCAL EMERGING BUSINESS (SLEB) PREFERENCE POINTS

The County is vitally interested in promoting the growth of small and emerging local businesses by means of increasing the participation of these businesses in the County's purchase of goods and services.

As a result of the County's commitment to advance the economic opportunities of these businesses, Bidders must meet the County's SLEB requirements in order to be considered for the contract award. These requirements can be found online at:

<http://acgov.org/auditor/sleb/overview.htm>

For purposes of this proposal, applicable industries include, but are not limited to, the following North American Industry Classification System (NAICS) Codes 621330, 621420, and 624190.

A small business is defined by the [United States Small Business Administration](#) (SBA) as having no more than the number of employees or average annual gross receipts over the last three (3) years required per SBA standards based on the small business's appropriate NAICS code.

An emerging business is defined by the County as having either annual gross receipts of less than one-half (1/2) that of a small business OR having less than one-half (1/2) the number of employees AND that has been in business less than five (5) years.

D. BIDDERS' CONFERENCES

ACBH strongly recommends that Bidders thoroughly read the RFP prior to attending any Bidders' Conferences. ACBH shall hold two Bidders' Conferences. Bidders' Conferences will be held to:

- Provide an opportunity for Bidders to ask specific questions about the program and request RFP clarification; and
- Provide the County with an opportunity to receive feedback regarding the program and RFP.

ACBH shall respond to written questions submitted prior to the Bidders' Conferences, in accordance with the Calendar of Events and verbal questions received at the Bidders Conferences, whenever possible at the Bidders' Conferences. ACBH shall address all questions and include the list of Bidders' Conferences attendees in an Addendum following the Bidders Conferences in accordance with the Calendar of Events section of this RFP.

Bidders are not required to attend the Bidders' Conferences. However, attendance to at least one Bidders' Conference is strongly encouraged in order to receive information to assist Bidders in formulating proposals.

Failure to participate in a Bidders' Conference shall in no way relieve the Bidder from furnishing program and services requirements in accordance with these specifications, terms and conditions and those released in any Addenda.

E. SUBMITTAL OF PROPOSALS/BIDS

1. All proposals must be received electronically by ACBH **no later than 2:00 pm on the due date and location specified on the RFP cover and Calendar of Events in this RFP.** ACBH cannot accept late and/or unsealed proposals.

ACBH shall only accept proposals received electronically by the time and date indicated on the RFP cover and in the Calendar of Events. Any proposals received after said time and/or to an email address other than the stated email address cannot be considered.

All proposals must be received and time stamped at the stated delivery address prior to the time designated. ACBH's timestamp shall be considered the official timepiece for the purpose of establishing the actual receipt of bids.

2. Bidders must submit proposals which clearly state Bidder, RFP name, and Service(s) applying for. Proposals shall include:
 - a. A single PDF copy of the proposal, with original ink signatures. Proposal is to be clearly marked on the cover (it should be clear who the Bidder is on the front of the proposal);
 - b. An electronic Excel copy of the completed Exhibit B-1 Program Budget, saved with the Bidder's name.

Bidders shall ensure that proposals are:

- Single spaced
 - Maximum 1-inch margins
 - 11-point Arial font
 - Conform to the maximum page limits
3. Bidder agrees and acknowledges all RFP specifications, terms and conditions and indicates ability to perform by submission of proposal.
 4. Submitted proposals shall be valid for a minimum period of eighteen months.
 5. All costs required for the preparation and submission of a proposal shall be borne by Bidder.
 6. Proprietary or Confidential Information: No part of any proposal response is to be marked as confidential or proprietary. County may refuse to consider any bid response or part thereof so marked. Bid responses submitted in response to this RFP may be subject to public disclosure. County shall not be liable in any way for disclosure of any such records. Additionally, all proposals shall become the property of County. County reserves the right to make use of any information or ideas contained in submitted proposals. This provision is not intended to require the disclosure of records that are exempt from disclosure under the California Public Records Act (Government Code Section 6250, et seq.) or of "trade secrets" protected by the Uniform Trade Secrets Act (Civil Code Section 3426, et seq.).
 7. All other information regarding proposals shall be held as confidential until such time as the CSC/Evaluation Panel has completed their evaluation, notification of recommended award has been made and the contract has been fully negotiated with the recommended awardees named in the intent to award/non-award notification. The submitted proposals shall be made available upon request no later than five calendar days before approval of the award and contract is scheduled to be heard by the Board of Supervisors. All parties submitting proposals, either qualified or unqualified, shall receive mailed intent to award/non-award notification, which shall include the name of the Bidder(s) recommended for award of this service. In addition, recommended award information will be posted on the ACBH website.
 8. Each proposal received, with the name of the Bidder, shall be entered on a record, and each record with the successful proposal indicated thereon shall, after the negotiations and award of the order or contract, be open to public inspection.

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 will 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 tender's final payment to the Bidder.
10. Bidder expressly acknowledges that it is aware that if a false claim is knowingly submitted (as the terms "claim" and "knowingly" are defined in the California False Claims Act, Cal. Gov. Code, §12650 et seq.), County will be entitled to civil remedies set forth in the California False Claim Act. It may also be considered fraud and the Contractor may be subject to criminal prosecution.
11. The undersigned Bidder certifies that it is, at the time of bidding, and shall be throughout the period of the contract, licensed by the State of California to do the type of work required under the terms of the Contract Documents. Bidder further certifies that it is regularly engaged in the general class and type of work called for in the Bid Documents.
12. The undersigned Bidder certifies that it is not, at the time of bidding, on the California Department of General Services (DGS) list of persons determined to be engaged in investment activities in Iran or otherwise in violation of the Iran Contracting Act of 2010 (Public Contract Code Section 2200-2208).
13. It is understood that County reserves the right to reject this bid and that the bid shall remain open to acceptance and is irrevocable for a period of 180 days, unless otherwise specified in the Bid Documents

F. RESPONSE FORMAT/PROPOSAL RESPONSES

Bidders may use the provided MS Word Bid Response Template to address and complete your proposals. The person(s) administering the competitive process will review each proposal for completeness against the RFP requirements and ensure that responses conform to a **total page maximum of twenty-five (25)**. Bidders cannot submit non-material documents after the proposal due date, in order to complete their proposal. Proposals with any missing items of submittals as outlined in the RFP and any Addenda shall be deemed incomplete and may be rejected.

Proposals shall be complete, substantiated, concise and specific to the information requested. Any superfluous and unrequested material submitted with the bid will be removed and will not be viewed by the Evaluation Panel. Any material deviation from the requirements may be cause for rejection of the proposal, as determined at ACBH' sole discretion.

Table 1
 The proposal sections, instructions and page maximums are contained in Table 1. **Proposal shall not exceed twenty-five (25) pages excluding Exhibits and Attachments.**

| Section | Instructions | Suggested Page Max. |
|--|--|---------------------|
| 1. TITLE AND TABLE OF CONTENTS | Include a table of contents with page numbers indicating the location of each section in the bid. | N/A |
| 2. EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE | Review, complete, and submit the requested information included as Exhibit A Bidder Information and Acceptance form with your bid. | N/A |
| SLEB PARTNERING SHEET | Every Bidder must fill out and submit a signed SLEB Partnering Information Sheet in the Bid Template, indicating their SLEB certification status. | N/A |
| 3. ORGANIZATIONAL CAPACITY AND REFERENCES | <p><u>Supply Organizational Capacity and Reference sections a. and b. in the original proposal only.</u></p> <p>a. Debarment and Suspension Bidders, its principal and named subcontractors must not be identified on the list of Federally debarred, suspended or other excluded parties located at the following databases:</p> <ul style="list-style-type: none"> • https://www.sam.gov/portal/SAM/#1 • https://exclusions.oig.hhs.gov/ • https://files.medical.ca.gov/pubsdoco/Sandllanding.asp • https://dmf.ntis.gov/ <p>b. References Provide three current and three former references that Bidder worked with on a similar scope, volume and requirements to those outlined in this RFP. Bidders must verify that the contact information for all references provided is</p> | N/A |

| Section | Instructions | Suggested Page Max. |
|---|---|---------------------|
| | <p>current and valid. Bidders are strongly encouraged to notify all references that the County may be contacting them to obtain a reference.</p> <p>The County may contact some or all of the references provided in order to determine Bidder’s performance record on work similar to that described in this request. The County reserves the right to contact references other than those provided in the proposal and to use the information gained from them in the evaluation process.</p> <p>Do not include ACBH staff as references. Provide a list of <u>six (6)</u> total references – three (3) current and three (3) former, please provide the following;</p> <ul style="list-style-type: none"> • Company Name • Reference Name • Address • Phone number • E-mail address • Services Provided/Date(s) of Service | |
| EXHIBIT D: EXCEPTIONS, CLARIFICATIONS, AMENDMENTS | Indicate all of Bidder proposed exceptions to the County’s requirements, conditions and specifications as stated within this RFP. | N/A |
| 4. LETTER OF TRANSMITTAL/ EXECUTIVE SUMMARY | Complete and submit a synopsis of the highlights and benefits of each proposal including total funding request and staffing overview. | 1 |
| 5. BIDDER MINIMUM QUALIFICATIONS AND SPECIFIC REQUIREMENTS | <p>Bid Template may be used to describe and demonstrate how Bidder meets all of the minimum qualifications:</p> <ul style="list-style-type: none"> • At least two years of experience working with children and youth; and | 2 |

| Section | Instructions | Suggested Page Max. |
|--|--|---------------------|
| | <ul style="list-style-type: none"> At least one year of experience billing Medi-Cal through a County or Managed Care Plan in the past three years. | |
| <p>6. BIDDER EXPERIENCE, ABILITY AND PLAN</p> | <p>Bidders may use the Bid Template to complete and submit the information below.</p> | <p>N/A</p> |
| | <p>a. Describe, in detail, Bidder’s Understanding of and Experience with the Priority Population Needs including:</p> | <p>(4)</p> |
| | <p>i. Bidder’s understanding of the priority population, including:</p> <ol style="list-style-type: none"> Children and youth eligible for full scope Medi-Cal that meet medical necessity for Specialty Mental Health; Behavioral, academic, socio-economic, cultural, and linguistic needs; Risk factors and barriers; School-specific population and community needs, as related to school culture and climate. | <p>2</p> |
| | <p>ii. Bidder’s experience working with the priority population, including:</p> <ol style="list-style-type: none"> Providing mental health services in school-based, place based and/or other community settings to the priority population; Developing and implementing successful strategies to address barriers faced by clients; Identifying and building on existing client protective factors; and Developing culturally responsive, trauma informed, and family driven services serving the priority population. | <p>2</p> |
| | <p>b. Describe in detail, Bidder’s Service Delivery Approach, including:</p> | <p>(5)</p> |

| Section | Instructions | Suggested Page Max. |
|---------|--|---------------------|
| | <p>i. Bidder’s plan to provide SBBH services to clients, including:</p> <ol style="list-style-type: none"> 1. Providing clinical assessments; individual, group and family therapy; case management; plan development; collateral services; and rehabilitation services; 2. Identifying and providing clinical treatment modalities; 3. Plan for delivering services on-site, after hours, in the community and in homes; and 4. Proposed EBPs, promising practices, and/or community defined approaches and how these will support program goals. | 3 |
| | <p>ii. Bidder’s plan to provide services, including:</p> <ol style="list-style-type: none"> 1. Plan for school site service coordination; 2. Plan to prioritize referrals for students enrolled in school sites as well as children and youth in nearby schools or neighborhoods referred through ACCESS; 3. Plan for engaging family members or supports; and 4. Proposed strategies for maintaining compliance and communication of screening and referring children and youth to additional services and resources; and 5. If planning on providing psychiatry and medication needs of clients, provide plan. | 2 |
| | <p>c. Describe, in detail, Bidder’s Planned Staffing and Organizational Capacity, including:</p> | (5) |
| | <p>i. Roles and responsibilities of program staff, including:</p> <ol style="list-style-type: none"> 1. Program staffing plan which includes staff titles and FTE, language capacity, roles, responsibilities, and supervision structure. Provide rationale for | 3 |

| Section | Instructions | Suggested Page Max. |
|---------|---|---------------------|
| | <p>proposed staffing plan including tasks necessary to provide program services and how they will be assigned to staff;</p> <ol style="list-style-type: none"> 2. Plan for hiring, training, supervising, and retaining staff. Include how staff will reflect the priority population and language profiles; and 3. Plan for providing appropriate and regular clinical supervision and oversight of proposed program components. | |
| | <p>ii. Bidder’s planned organizational infrastructure, including:</p> <ol style="list-style-type: none"> 1. How the proposed program will be integrated into existing organizational structure and services. Include organizational chart that illustrates where the program will sit within the organization, as Attachment 1; 2. Capacity or plan to track and enter data following County requirements; and 3. Capacity or plan to meet Federal, State, and Medi-Cal billing, clinical and quality assurance requirements. | 2 |
| | <p>d. Describe, in detail, Bidder’s experience in Forming Partnerships and Collaboration, including:</p> | (2) |
| | <ol style="list-style-type: none"> 1. Experience building and sustaining teams and/or collaborations that can address the mental health needs of the priority population; 2. Experience providing school based or place-based collaborations; 3. Proposed strategies for forming productive school-based collaborations; and 4. Proposed strategies for initial and ongoing family engagement in relation to clinical services for children and youth; 5. Experience with and strategies to adapt to school-specific cultures and processes; and | 2 |

| Section | Instructions | Suggested Page Max. |
|--|---|---------------------|
| | <p>6. Experience, if applicable, and plan to participate in the Coordination of Services Team (COST) process.</p> | |
| | <p>e. Describe, in detail, Bidder’s Experience and Plan to Track Data and Outcomes, including Bidder’s plan for collecting data specified in this RFP and tracking outcomes for quality improvement, including:</p> | (2) |
| | <p>i. Experience with data collection, tracking, and reporting including data tracking tools or systems for billing and program monitoring/improvement. Include examples of how data has been used for quality and performance improvement.</p> | 2 |
| 7. IMPLEMENTATION SCHEDULE AND PLAN | Implementation Schedule and Plan | (2) |
| | <p>a. Submit Bidder’s Implementation Schedule and Plan with due dates around the following activities:</p> <ol style="list-style-type: none"> 1. Obtaining appropriate clinical space at school site(s) and site certification(s) as needed, may include acquiring office space or other appropriate clinical space at school sites; 2. Hiring and training staff; 3. Developing appropriate school site contacts; and 4. Delivering SBBH services. | 1 |
| | <p>b. Describe Bidder’s identification of and strategies for mitigation of risks and barriers, which may adversely affect program implementation.</p> | 1 |
| | Budget and Budget Narrative | (2) |
| | <p>Budget</p> <p>a. Cost-Coefficient – Bidder does not need to submit anything additional for this.</p> | N/A |

| Section | Instructions | Suggested Page Max. |
|----------------|---|---------------------|
| 8. COST | <p>b. Complete and submit one BUDGET WORKBOOK (saved in Excel). See Budget Instructions tab. Complete and submit all worksheets in the Workbook.</p> | |
| | <p>c. Provide a detailed Budget Narrative to explain the costs and calculations in the budget. The narrative must match the budget, and be aligned with the requirements of this RFP. Narrative should explain how calculations were made on the following and provide explanation on any variances in costs:</p> <ol style="list-style-type: none"> 1. Required Staffing 2. Salaries and Benefits 3. Operating Expenses 4. Administrative and/or Indirect Costs | 2 |

G. EVALUATION CRITERIA/SELECTION COMMITTEE

All proposals that pass the initial Evaluation Criteria which are determined on a pass/fail basis (Bidder Minimum Qualifications, Completeness of Response, Conformance to Page Limitations, and Debarment and Suspension) shall be evaluated by the CSC/Evaluation Panel. The CSC/Evaluation Panel may be composed of County staff and other individuals who may have expertise or experience in the RFP content. The CSC/Evaluation Panel shall score and recommend a Contractor in accordance with the evaluation criteria set forth in this RFP. The evaluation of the proposals for recommendation shall be within the sole judgment and discretion of the CSC/Evaluation Panel.

All contact during the evaluation phase shall be through the ACBH contact person only. Bidders shall neither contact nor lobby evaluators during the evaluation process. Attempts by Bidder to contact and/or influence members of the CSC/Evaluation Panel may result in disqualification of Bidder.

The CSC will evaluate each proposal meeting the minimum qualifications and requirements set forth in this RFP. Bidders should bear in mind that any proposal that is unrealistic in terms of the technical or schedule commitments, or unrealistically high or low in cost, shall be deemed reflective of an inherent lack of technical competence or indicative of a failure to comprehend the complexity and risk of the County's requirements as set forth in this RFP.

ACBH will hold separate County Selection Committees (CSC)/Evaluation Panel processes for each SBBH program as detailed in Section I.A. All bids under each program will be evaluated as separate processes.

As a result of this RFP, the County intends to award up to nine contracts to responsible Bidders whose response conforms to the RFP and whose proposal presents the greatest value to the County, all evaluation criteria considered. The combined weight of the evaluation criteria is greater in importance than cost in determining the greatest value to the County. The goal is to award a contract to the Bidders that demonstrate the best quality as determined by the combined weight of the evaluation criteria. The County may award a contract of higher qualitative competence over the lowest priced proposal.

The basic information that each proposal section should contain is specified in section II. F. These specifications should be considered as requirements. Much of the material needed to present a comprehensive proposal can be placed into one of the sections listed in II. F. However, other criteria may be added to further support the evaluation process whenever such additional criteria are deemed appropriate in considering the nature of the services being solicited.

Each of the Evaluation Criteria below shall be used in ranking and determining the quality of proposals. Proposals shall be evaluated according to each Evaluation Criteria and scored on a zero to five-point scale shown in Table 2. The scores for all the Evaluation Criteria shall be added

according to their assigned weight, as shown in Table 3, to arrive at a weighted score for each proposal. A proposal with a high weighted total shall be deemed of higher quality than a proposal with a lesser-weighted total. The final maximum score for any program is five hundred fifty (550) points including the possible fifty (50) points for local and small, local and emerging, or local preference points (maximum 10% of final score).

The evaluation process may include a two-stage approach including an initial evaluation of the written proposal and preliminary scoring to develop a short list of Bidders that will continue to the final stage of oral interview and reference checks. The preliminary scoring will be based on the total points, excluding points allocated to references, and oral interview.

If the two-stage approach is used, the three Bidders that receive the highest preliminary scores and with at least 200 points shall be invited to participate in an oral interview. Only the Bidders meeting the short list criteria shall proceed to the next stage. All other Bidders shall be deemed eliminated from the process. All Bidders shall be notified of the short list participants; however, the preliminary scores at that time shall not be communicated to Bidders.

The zero to five-point scale range is defined in Table 2.

Table 2

| Score | Label | Description |
|-------|---------------------------|---|
| 0 | Not Acceptable | Non-responsive, fails to meet RFP specification. The approach has no probability of success. If a mandatory requirement this score shall result in disqualification of proposal. |
| 1 | Poor | Below average, falls short of expectations, is substandard to that which is the average or expected norm, has a low probability of success in achieving objectives per RFP. |
| 2 | Fair | Has a reasonable probability of success, however, some objectives may not be met. |
| 3 | Average | Acceptable, achieves all objectives in a reasonable fashion per RFP specification. This shall be the baseline score for each item with adjustments based on interpretation of proposal by Evaluation Committee members. |
| 4 | Above Average/ Good | Very good probability of success, better than that which is average or expected as the norm. Achieves all objectives per RFP requirements and expectations. |
| 5 | Excellent/ Exceptional | Exceeds expectations, very innovative, clearly superior to that which is average or expected as the norm. Excellent probability of success and in achieving all objectives and meeting RFP specification. |

The evaluation criteria and respective weights for this RFP are contained in Table 3.

Table 3

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|---|--|--|-----------|
| 1. TITLE PAGE | Reviewed for completeness | Complete/Incomplete | Pass/Fail |
| 2. EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE | | | |
| 3. LETTER OF TRANSMITTAL/ EXECUTIVE SUMMARY | | | |
| 4. BIDDER MINIMUM QUALIFICATIONS | <ul style="list-style-type: none"> At least two years of experience working with children and youth; and At least one year of experience billing Medi-Cal through a County or Managed Care Plan in the past three years. | <p>Meets/Does Not Meet Minimum Qualification</p> <p>Responses to this RFP must be complete. Responses that do not include the proposal content requirements identified within this RFP and subsequent Addenda and do not address each of the items listed below will be considered incomplete. Additionally, bid responses that do not conform to the page limitations in Table 1, will be rated a Fail in the Evaluation Criteria and will receive no further consideration.</p> | |
| 5. ORGANIZATIONAL CAPACITY AND REFERENCES | a. Debarment and Suspension | <p>To be considered for contract award, the Bidder and its principal may not be identified on the list of Federally debarred, suspended or other excluded parties located in the following databases:</p> <ul style="list-style-type: none"> https://www.sam.gov/portal/SAM/#1 https://exclusions.oig.hhs.gov/ https://files.medical.ca.gov/pubsdoco/Sandllanding.asp https://dmf.ntis.gov/ | Pass/Fail |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|---|--|--|-----------------------------|
| | <p>b. ACBH will accept only non-ACBH references. ACBH will check references for Bidders placed on the shortlist and ask the references standard questions, which will be evaluated by the Evaluation Panel.</p> | <p>How do the Bidder's references respond to the following:</p> <ul style="list-style-type: none"> • Bidder's capacity to perform the services as stated; • Areas in which Bidder did well and areas in which bidder could have improved (if applicable); • Experience working with children and youth; • Communication and responsiveness, responding to and processing referrals, reporting and invoicing, training, customer service, compliance with program, legal, and/or funding requirements, documentation and reliability on a scale of one to five; • Whether the project was completed on time and on budget; • Capacity and ability to meet program or contract deliverables; • Bidder's ability to collaborate with other parties on shared goals; • References' overall satisfaction with Bidder; • References' comfort with recommending the Bidder to Alameda County; • Whether Bidder would be used again by Reference; and • Any other information that would assist in Alameda County's work with the Bidder? | 5 |
| 6. BIDDER EXPERIENCE, ABILITY AND PLAN | <p>a. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under the <i>Understanding of and Experience with the Priority Population Needs.</i></p> | | (16) Section Subtotal |
| | <p>i. Understanding of the Priority Population</p> | <p>How well does Bidder demonstrate understanding of the priority population including:</p> | 6 |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|-------------|---|---|----------------------------------|
| | | <ul style="list-style-type: none"> • Children and youth eligible for full scope Medi-Cal that meet medical necessity for Specialty Mental Health services; • Behavioral, academic, socio-economic, cultural, and linguistic needs of children and youth zero to 21 years of age; • Risk factors and barriers; and • School-specific population and community needs, as related to school culture and climate? | |
| | <p>ii. Experience with Priority Population</p> | <p>How well does Bidder demonstrate experience working with the priority population including:</p> <ul style="list-style-type: none"> • Providing mental health services in school-based, place based, and/or other community settings to the priority population; • Developing and implementing successful strategies to address barriers faced by the priority population; • Identifying and building on existing client protective factors; and • Developing culturally responsive, trauma-informed, and family driven services? | <p>10</p> |
| | <p>b. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder’s response to following questions which will become the total score under the <i>Service Delivery Approach.</i></p> | | <p>(18) Section Subtotal</p> |
| | <p>i. Plan to provide SBBH services</p> | <p>How well-matched is Bidder’s plan to provide SBBH services to clients, including:</p> <ul style="list-style-type: none"> • Plan to provide clinical assessments; individual, group, and family therapy; case management; plan development; collateral services; and rehabilitation services; • Identifying and providing clinical treatment modalities; and | <p>10</p> |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|-------------|--|--|------------------------------|
| | | <ul style="list-style-type: none"> • Plan for delivering services on-site, after hours, in the community and in homes? • Proposed EBPs, promising practices, and/or community defined approaches? How well do these proposed practices and/or approaches support program goals? | |
| | <p>ii. Supports and Engagement</p> | <p>How well-matched is Bidder’s plan to provide services, including:</p> <ul style="list-style-type: none"> • Proposed plan for school site services coordination; • Proposed plan to prioritize referrals for students enrolled in school sites as well as children and youth in nearby schools or neighborhoods referred through ACCESS; • Proposed plan for engaging family members or supports; • Proposed strategies for maintaining compliance and communication of screening and referring children and youth to additional services and resources; and • If planning on providing psychiatry and medication needs of clients: proposed plan for providing psychiatry and medication needs of clients? | 8 |
| | <p>c. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder’s response to following questions which will become the total score under the <i>Planned Staffing and Organizational Capacity.</i></p> | | (16) Section subtotal |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|-------------|--|--|---------------------------------|
| | <p>i. Planned Staffing Structure</p> | <p>How well-matched is Bidder’s staffing plan, including:</p> <ul style="list-style-type: none"> • How appropriate is proposed plan for program staffing including staff titles and FTE, language capacity, roles, responsibilities, and supervision structure? • How well matched is Bidder’s rationale for staffing plan; • How well does Bidder identify tasks necessary to provide program services? How well does Bidder describe how tasks will be assigned to staff? • How well matched is Bidder’s plan for hiring, training, supervising, and retaining staff? How responsive if the staffing plan to the priority population and language profiles? • How appropriate is Bidder’s plan for clinical supervision and oversight of proposed program components? | <p>10</p> |
| | <p>ii. Capacity and Organizational Infrastructure</p> | <p>How well does Bidder describe its organizational infrastructure, and how well-matched to the proposed services is this infrastructure, including:</p> <ul style="list-style-type: none"> • How program services will be integrated into Bidder’s existing organizational structure and services? How well does Attachment 1 reflect this? • Capacity or plan to track and enter data following County requirements; and • Experience and/or capacity to meet Federal, State, and Medi-Cal billing, clinical, and quality assurance requirements? | <p>6</p> |
| | | <p>d. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder’s response to following questions which will become the total score under Forming Partnerships and Collaboration</p> | <p>(7) Section subtotal</p> |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|---|---|--|---------------------------------|
| | <p>i. Partnerships and Collaboration</p> | <ul style="list-style-type: none"> • How appropriate is Bidder’s experience building and sustaining teams and/ or collaborations that can address the educational and mental health needs of the priority population? • How well-matched is Bidder’s experience providing school based or place-based collaborations? • How well does Bidder demonstrate experience forming productive school-based collaborations? • How well-matched are the proposed strategies for initial and ongoing family engagement in relation to clinical services for children and youth? • How well does Bidder demonstrate experience with adapting to school-specific cultures and processes? • How appropriate is Bidder’s experience, if applicable, and plan to participate in the COST process? | <p>7</p> |
| | <p>e. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder’s response to following questions which will become the total score under Tracking Data and Outcomes.</p> | | <p>(6) Section subtotal</p> |
| | <p>ii. Track Data and Outcomes</p> | <ul style="list-style-type: none"> • How well does Bidder demonstrate experience with data collection, tracking, and reporting including data tracking tools, systems, and EHR system? How well matched are Bidder’s examples of how data has been used for quality and performance improvements? | <p>6</p> |
| <p>7. IMPLEMENTATION SCHEDULE AND PLAN</p> | <p>The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder’s response to following questions which will become the total score under Implementation Plan and Schedule.</p> | | <p>(11)</p> |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|----------------|---|---|--------|
| | <p>i. Implementation Plan</p> | <ul style="list-style-type: none"> • How detailed and specific is Bidder’s response? • How realistically does Bidder account for timeline to complete each specified milestone? Milestones include: <ol style="list-style-type: none"> 1. Obtaining appropriate clinical space at school site(s) and site certifications as needed, may include acquiring office space or other appropriate clinical space at school sites; 2. Hiring, training staff 3. Developing appropriate school site contacts 4. Delivering SBBH services | 6 |
| | <p>ii. Identification and Strategies for Mitigation of Risks and Barriers</p> | <ul style="list-style-type: none"> • How thorough, thoughtful, and realistic is Bidder’s identification of challenges and barrier mitigation strategies? • How well does Bidder assess barriers? • How creative, solution-oriented and appropriate are Bidder’s strategies? | 5 |
| 8. COST | <p>The Evaluation Panel will review the Exhibit B-1 Budget Workbook and the Budget Narrative and assign a score based on how Bidder’s proposed program budget aligns with the requirements of the RFP which will become the total score under the Cost. The Cost-Coefficient is scored by applying the standard County formula.</p> | | (11) |
| | <p>i. Cost Co-Efficient</p> | <ul style="list-style-type: none"> • Low bid divided by low bid x 5 x weight = points <i>For example:</i> $\\$100,000 / \\$100,000 = 1 \times 5 \times 5 = 25 \text{ points}$ • Low bid divided by second lowest bid x 5 x weight = points • Low bid divided by third lowest bid x 5 x weight = points • Low bid divided by fourth lowest bid x 5 x weight = points | 2 |

| RFP SECTION | EVALUATION METHOD | EVALUATION CRITERIA | WEIGHT |
|---|---|---|--------|
| | ii. Budget iii. Budget Narrative | <ul style="list-style-type: none"> • How well-matched is Bidder’s budget to the proposed program? • How well does the budget capture all activities and staff proposed in the Budget? • How well does Bidder allocate staff and resources? • How appropriate are the staffing and other costs? • How much value does the proposal add considering the cost of the program, expected outcomes and the number of clients served? • How well does the narrative detail how Bidder arrived at particular calculations? • How well does Bidder “show the work”? | 9 |
| EXHIBITS | Exceptions, Clarifications and Amendments | Complete/Incomplete Meets Minimum Requirements/ Fails to Meet Minimum Requirements | N/A |
| ORAL INTERVIEW, IF APPLICABLE | Criteria are created with the CSC/Evaluation Panel. | | 10 |
| PREFERENCE POINTS, IF APPLICABLE | SLEB | Five Percent (5%) | |
| | Local (not SLEB certified) | Five Percent (5%) | |

H. CONTRACT EVALUATION AND ASSESSMENT

During the initial sixty (60) day period of any contract, which may be awarded to a successful Bidder (“Contractor”), the CSC and/or other persons designated by the County may meet with the Contractor to evaluate the performance and to identify any issues or potential problems.

The County reserves the right to determine, in its sole discretion, (a) whether Contractor has complied with all terms of this RFP and (b) whether any problems or potential problems are evidenced which make it unlikely (even with possible modifications) that the proposed program and services will meet the County requirements. If, as a result of such determination the County concludes that it is not satisfied with Contractor, Contractors’ performance under any awarded contract as contracted for therein, the Contractor shall be notified of contract termination effective forty-five (45) days following notice. The County shall have the right to invite the next highest ranked Bidder to enter into a contract.

The County also reserves the right to re-bid these programs if it is determined to be in its best interest to do so.

I. AWARD

1. Proposals evaluated by the CSC/Evaluation Panel shall be ranked in accordance with the RFP section II.G. of this RFP.
2. The CSC shall recommend award of each contract to the Bidder who, in its opinion, has submitted the proposal that best conforms to the RFP and best serves the overall interests of the County and attains the highest overall point score. Award may not necessarily be recommended or made to the Bidder with the lowest price.
3. The County reserves the right to reject any or all proposals that materially differ from any terms contained in this RFP or from any Exhibits attached hereto, to waive informalities and minor irregularities in responses received, and to provide an opportunity for Bidders to correct minor and immaterial errors contained in their submissions. The decision as to what constitutes a minor irregularity shall be made solely at the discretion of the County.
4. Any proposal that contains false or misleading information may be disqualified by the County.
5. The County reserves the right to award to a single or multiple Contractors.
6. The County has the right to decline to award a contract in whole or any part thereof for any reason.
7. BOS approval to award a contract is required.

8. A contract must be negotiated, finalized, and signed by the intended awardee prior to BOS approval.
9. Final terms and conditions shall be negotiated with the Bidder recommended for award. The successful Bidder may request a copy of the Master Agreement template from the ACBH RFP contact. The template contains the agreement boilerplate language only.
10. The RFP specifications, terms, conditions, Exhibits, Addenda and Bidder's proposal, may be incorporated into and made a part of any contract that may be awarded as a result of this RFP.

J. PRICING

Federal and State minimum wage laws apply. The County has no requirements for living wages. The County is not imposing any additional requirements regarding wages.

K. INVOICING

1. Contractor shall invoice the requesting department, unless otherwise advised, upon satisfactory receipt of product and/or performance of services.
2. Payment will be made within thirty days following receipt of invoice and upon complete satisfactory receipt of product and performance of services.
3. County shall notify Contractor of any adjustments required to invoice.
4. Invoices shall contain County purchase order (PO) number, invoice number, remit to address and itemized products and/or services description and price as quoted and shall be accompanied by acceptable proof of delivery.
5. Contractor shall utilize standardized invoice upon request.
6. Invoices shall only be issued by the Contractor who is awarded a contract.
7. Payments will be issued to and invoices must be received from the same Contractor whose name is specified on the POs.

L. NOTICE OF INTENT TO AWARD

At the conclusion of the proposal evaluation process ("Evaluation Process"), all Bidders will be notified in writing by e-mail, fax, or US Postal Services mail of the contract award

recommendation, if any, by ACBH. The document providing this notification is the Notice of Intent to Award.

The Notice of Intent to Award shall provide the following information:

- The name of the Bidder being recommended for contract award; and
- The names of all other Bidders that submitted proposals.

At the conclusion of the RFP response evaluation process and negotiations, debriefings for unsuccessful Bidders will be scheduled and provided upon written request and will be restricted to discussion of the unsuccessful Bidder's proposal.

- Under no circumstances shall any discussion be conducted with regard to contract negotiations with the recommended /successful Bidder.
- Debriefing may include review of the recommended/ successful Bidder's proposal/s with redactions as appropriate.

All submitted proposals shall be made available upon request no later than five (5) calendar days before approval of the award and contract is scheduled to be heard by the Board of Supervisors.

M. TERM/TERMINATION/RENEWAL

The term of the contract, which may be awarded pursuant to this RFP, will be one year and may be renewed thereafter, contingent on the availability of funds, Contractor's performance, continued prioritization of the activities and priority populations, as defined and determined by ACBH.

III. APPENDICES

A. GLOSSARY & ACRONYM LIST

| | |
|---|--|
| ACCESS | Alameda County Acute Crisis Care and Evaluation for Systemwide Services |
| Agreement | The formal contract between ACBHCS and Contractor. |
| ACBH | Alameda County Behavioral Health Care Services, a department of the Alameda County Health Care Services Agency. |
| Assessment | A service that is based on a method of interview, observation, and testing. This service may include a clinical analysis of the history and current status of a client or patient's mental, emotional, or behavior disorder, relevant cultural issues and history, diagnosis, and the use of testing procedures. |
| Bid | A Bidders' response to this Request; used interchangeably with proposal. |
| Bidder | The specific person or entity responding to this RFP. |
| BOS | County of Alameda Board of Supervisors. |
| Client | The recipient of services; used interchangeably with beneficiary and consumer. |
| Community-Based Organization (CBO) | A non-governmental organization that provides direct services to beneficiaries. |
| Community defined approaches | A partnership with persons of concern during all stages of the program cycle. It recognizes the resilience, capacities, skills and resources of persons of concern, builds on these to deliver protection and solutions, and supports the community's own goals. |
| Contractor | When capitalized, shall refer to selected Bidder that is awarded a contract. |
| Coordination of Services Team (COST) | The multi-disciplinary team of school-based services providers. |
| County | When capitalized, shall refer to the County of Alameda. |
| CSC | County Selection Committee, or Evaluation Panel |
| Culturally and Linguistically Appropriate Services (CLAS) | Services that are respectful of and responsive to the health beliefs, practices, and needs of diverse patients. |
| EHR | Electronic Health Records |
| EPSDT | Early and Periodic Screening, Diagnostic, & Treatment is a Medi-Cal benefit for individuals under the age of 21 who have full-scope Medi-Cal eligibility. |
| Evidence Based Practices (EBPs) | Well-defined practices that have been demonstrated to be effective through multiple research studies. |

| | |
|--|--|
| Federal | Refers to United States Federal Government, its departments and/or agencies. |
| Full Time Equivalent (FTE) | A budgetary term used to describe the number of total hours worked divided by the maximum number of compensable hours in a full-time schedule as defined by law. For example, if the normal schedule for a staff person is 40 hours per week (40*52 weeks–4 weeks for vacation=1,920). Someone working 1,440 hours during the year represents $1,440/1,920=.75$ FTE. |
| Licensed Practitioner of the Healing Arts (LPHA) | Licensed clinical staff (MD, PhD, MFT, LCSW) and staff who are registered with the California Board of Behavioral Sciences, usually registered MFT/ASW interns; psychologists who are waived by the State to provide services; and Master's level clinical nurse specialists who have national or state license to practice independently. |
| Mental Health Services | Individual, family or group services or interventions that are designed to provide information on mental health issues, reduction of mental disability and/or improvement or maintenance of functioning. |
| Outcomes | The extent of change in attitudes, values, behaviors, or conditions between baseline measurement and subsequent points of measurement. Depending on the nature of the intervention and the theory of change guiding it, changes can be short, intermediate, and longer-term outcomes. |
| Outpatient services | A broad term incorporating mental health, case management, crisis intervention, and medication support services. |
| Promising Practice | An intervention, program, service, strategy, or policy that shows potential or promise for developing into a best practice. |
| Proposal | Bidder's response to this RFP; used interchangeably with bid. |
| Qualified | Competent by training and experience to be in compliance with specified requirements. |
| Request for Proposal (RFP) | Shall mean this document, which is the County of Alameda's request for proposal to provide the services being solicited herein; also referred herein as RFP. |
| Response | Shall refer to Bidder's proposal submitted in reply to RFP. |
| SLEB | Small Local Emerging Business |
| SBBH | School Based Behavioral Health. An array of mental health services designed to support students' social-emotional learning and address barriers to learning. |
| State | Refers to State of California, its departments and/or agencies. |
| Therapy | A service activity, which is a therapeutic intervention that focuses primarily on symptom reduction as a means to improve functional impairments. |

B. MEDI-CAL REQUIREMENTS FOR SERVICE PROVIDERS

| Training Session (ACBH Unit) | Overview | Covered Topics | Who should attend from your agency |
|---|--|--|---|
| <p>Data Collection Billings and Benefits (800) 878-1313</p> <p>Training Available upon Request and as needed</p> | <p>This is the first training that individuals and organizational representatives should attend to learn the flow of client service data. Data Collection training provides guidelines for client data collection and data entry. It is a critical component of a provider's contract with ACBH.</p> | <ul style="list-style-type: none"> • INSYST System- Overview • Client Referrals • Verifying Client Eligibility- Overview • Client Registration • Client Episodes • Service Entry- Direct, Indirect, MAA, etc. • Disallowed Claims System • CSI Information • Invoicing and Deadlines • INSYST Reports • Reference Information/Terms and Definitions | <p>Administrative Manager Clinical Manager Business Office Manager Data Entry Staff Front Desk Clerical</p> |
| <p>Medi-Cal Eligibility Verification Provider Relations (800) 878-1313</p> <p>Training Available upon request and as needed</p> | <p>This training teaches the methods and process of verifying client's eligibility. It is the responsibility of the provider to determine Medi-Cal eligibility for all clients on a monthly basis.</p> | <ul style="list-style-type: none"> • Terminology • How to Verify Medi-Cal Eligibility- Internet • How to Verify Medi-Cal Eligibility- AEVS • MMEF Process • Medi-Cal Claim Process • Error Correction Report • SOC Procedures • Provider Responsibilities and Expectations | <p>Administrative Manager Business Office Manager Data Entry Staff Front Desk Clerical</p> |
| <p>INSYST Training Information Systems (510) 567-8181</p> <p>Training is scheduled on an as needed basis</p> <p>To enroll in training complete a User Authorization Form available online at: www.acbhcs.org/providers/INSYST/INSYST.htm</p> | <p>This is a hands-on training for learning how to navigate and input client information into the INSYST system.</p> | <ul style="list-style-type: none"> • Navigating through INSYST • Registration • Open/ Close Episodes • Service Entry • Reports • Utilization Review | <p>Administrative Manager Business Office Manager Data Entry Staff Front Desk Clerical</p> |

| Training Session (ACBH Unit) | Overview | Covered Topics | Who should attend from your agency |
|--|---|--|--|
| <p>Medi-Medi Documentation Trainings Quality Assurance (510) 567-8105</p> <p>Visit QA's website for their training schedule: http://www.acbhcs.org/providers/QA/QA.htm</p> | <p>This training provides information on required clinical documentation and assists providers in their Compliance efforts.</p> | <ul style="list-style-type: none"> • Clinical documentation • Coding • Timelines • Staffing | <p>Management/ QA Staff, direct service staff, as determined by the Mental Health Plan</p> |
| <p>Clinical Quality Review Team (CQRT) Ongoing Training Quality Assurance (510) 567-8105</p> <p>Visit QA's website for their training schedule: http://www.acbhcs.org/providers/QA/QA.htm</p> | <p>This training provides a year-long commitment for providers. The group meets once per month for three hours, to review charts for compliance with Medi-Medi Documentation Standards, best clinical practices, and to authorize services.</p> | <ul style="list-style-type: none"> • Medical Necessity • Medi-Medi Chart Documentation Standards • Quality of Services • Service Codes | <p>Clinical Supervisors, Quality Assurance Directors, and/or lead staff who are Licensed LPHA, Waivered, or registered LPHA.</p> |

C. SETTING-UP SERVICES AT A NEW MENTAL HEALTH SITE

What are the steps involved in starting-up services at a new mental health program/site approved by ACBH?

** Providers should be informing their ACBH Contract Managers of a requested new site within their existing allocation at least 60-90 days prior to the anticipated start date of services at a new site via the Request for Program Change Request Form, which is available online at: <http://www.acbhcs.org/providers/network/cbos.htm>. New sites are subject to approval by ACBH, and services cannot start at an approved site until certain minimum requirements, such as fire clearance, are in place. Providers should contact their ACBH Contract Managers if there are any additional questions about what is needed for the start-up of mental health services for a specific new program/site approved by ACBH. **

| What needs to be completed? | Which programs does this apply to? | Does this apply? | Date complete? | Who is responsible? | Notes |
|---|--|------------------|----------------|---------------------|--|
| 1. Apply for any specialized permit, certification and/or licensure which is required for service delivery, outside of Medi-Cal Certification | <ul style="list-style-type: none"> Specialized new programs/ sites, such as residential, crisis residential and/or outpatient services in a group home setting | | | Provider | <ul style="list-style-type: none"> These are generally permits, certifications and/or licensure from other bodies, including but not limited to local jurisdictions, Community Care Licensing (CCL) and the Department of Health Care Services (DHCS) The applications for these specialized permits, certifications and/or licensures can take some time (around six months for some), so it is helpful to plan for and submit these applications early in the process if they are a requirement for service delivery |
| 2. Secure Fire Clearance and send to ACBH Contracts Unit, and also to ACBH QA for programs which will be billing to Medi-Cal | <ul style="list-style-type: none"> All new programs/sites which bill to Medi-Cal Most other new programs/sites which provide direct onsite services to clients | | | Provider | <ul style="list-style-type: none"> Timeline for scheduling fire clearance can vary by jurisdiction, but it can be several months For school sites, specify that you are requesting fire clearance for an individual clinical space or classroom versus the whole school At a given location, the fire clearance must specify all suite numbers, classrooms and addresses where service delivery will occur A new fire clearance will generally be needed before moving to a new suite number or classroom, even if it is within the same building or on the same school campus When items are out of compliance, fire jurisdiction or fire inspection company may |

| What needs to be completed? | Which programs does this apply to? | Does this apply? | Date complete? | Who is responsible? | Notes |
|---|--|------------------|----------------|---|--|
| | | | | | <p>invoke a plan of correction and need to come back, extending the timeline</p> <ul style="list-style-type: none"> • Fire clearance must be signed, dated, include the site address and meet local fire jurisdiction requirements to be valid - Fire clearance is different than a fire sprinkler check, and a fire sprinkler check will not suffice for the purposes of fire clearance • There is a nominal cost for fire clearance, generally between \$80-100 |
| <p>3. Apply for new organizational National Provider Identifier (NPI) Number or a change of address for an existing NPI, and report to ACBH Contracts Unit and QA</p> | <p>Providers which have no existing NPI at this site, and will be adding a new program/site which will enter services into an ACBH-approved data entry and claiming system</p> | | | <p>Provider</p> | <ul style="list-style-type: none"> • Timeline can vary from 72 hours to 45 days • Applying electronically on the NPPES website (https://nppes.cms.hhs.gov/NPPES/Welcome.do) is recommended as this can sometimes be faster • Record and secure your NPPES username, password and security questions as this can be important in the future • Customer Service can reset your password if needed • More information available here: http://www.acbhcs.org/providers//npi/npi.htm • Providers should only apply for change of address for an existing NPI if all programs/RUs at one site are moving to a new site (i.e., a complete move) |
| <p>4. Negotiate new or updated contract</p> | <p>All new programs/sites</p> | | | <ul style="list-style-type: none"> • ACBH Contracts Unit • Provider | <ul style="list-style-type: none"> • ACBH Contracts Unit Contract Managers will work with internal ACBH partners to send draft Exhibit A Language for provider to respond to, and Budget Template for provider to complete • Discussion and negotiation will need to occur for any areas where the expectations are unclear or where a difference of opinion exists in what a particular expectation should be • More information about standard Exhibits and contracting is available at: |

| What needs to be completed? | Which programs does this apply to? | Does this apply? | Date complete? | Who is responsible? | Notes |
|---|---|------------------|----------------|---------------------|---|
| | | | | | http://www.acbhcs.org/providers/network/cbos.htm |
| 5. Complete training on programmatic and fiscal contractual requirements | Providers which have not had a similar type of contracted program with ACBH, or may benefit from additional training in this area | | | Provider | <ul style="list-style-type: none"> Should generally occur prior to finalizing the contract, but timing can be later for some topics Contact your ACBH Contract Managers to request training, and please identify the specific types of areas you would like training around (i.e., budget; invoicing; better understanding specific Exhibit A requirements; better understanding other standard programmatic, fiscal and operating requirements in contract Exhibits outside of the Exhibit A and Budget; etc.) |
| 6. Contact ACBH QA for Site Certification Visit and collaborate with QA on any identified follow-up items | New programs/sites which will be billing to Medi-Cal | | | Provider | <ul style="list-style-type: none"> Timeline can vary from 4-8 weeks QA will not schedule site visit until they have received fire clearance; policies, procedures and other requested material; and site is operational or prepared to begin providing services More information available here, under Item 16: Medi-Cal Site Certification: http://www.acbhcs.org/providers/QA/qa_manual.htm |
| 7. Issuance of ACBH Site Certification Letter to Provider and ACBH Contracts Unit | New programs/sites which will be billing to Medi-Cal | | | ACBH QA | <ul style="list-style-type: none"> Timeline can vary from 2-8 weeks For new sites, the timeline will depend on how long it takes for the California Department of Health Care Services (DHCS) to assign a Provider Number once ACBH Provider Relations requests the Provider Number from DHCS QA will not issue Site Certification Letter until they have NPI and confirmation that all corrective action items have been addressed |
| 8. Request of new Reporting Unit (RU) or change of | New programs/sites which will be assigned a RU for entry of services into an ACBH-approved | | | ACBH Contracts Unit | <ul style="list-style-type: none"> Timeline can vary from 14-45 days Process cannot be initiated prior to receipt of the Medi-Cal Site Certification for new programs/sites which will be billing to Medi-Cal |

| What needs to be completed? | Which programs does this apply to? | Does this apply? | Date complete? | Who is responsible? | Notes |
|--|---|------------------|----------------|-------------------------|---|
| address to an existing RU ²² | data entry and claiming system | | | | <ul style="list-style-type: none"> Needs to be routed through multiple ACBH Units for approval and set-up |
| 9. Notification of set-up of new RU or change of address to an existing RU | New programs/sites which will be assigned a RU for entry of services into an ACBH-approved data entry and claiming system | | | ACBH Provider Relations | <ul style="list-style-type: none"> Provider will receive email notification from ACBH Provider Relations Provider should contact ACBH Contracts Unit Fiscal Contract Manager for questions around assigned procedure codes which can be billed through new RU Provider should contact ACBH QA for questions about appropriate use of assigned procedure codes for service delivery and documentation |
| 10. Complete Initial Data Collection Training with ACBH Provider Relations | New programs/sites which will be assigned a RU for entry of services into an ACBH-approved data entry and claiming system, and have not had experience in this area or may benefit from additional training | | | Provider | <ul style="list-style-type: none"> Should occur just before the start of services ACBH Provider Relations will contact the identified provider liaison to set-up Prior to the training, ACBH Provider Relations will need the provider to submit a list of staff to be trained and the role of each of these staff within the larger process (i.e., supervisors, clinical managers, intake/registration staff, and data entry staff) This will include information on a number of topics including how to collect initial data via paper forms and how to bill for other health insurance |
| 11. Complete Clinical Documentation Training with ACBH QA | New programs/sites which will be billing to Medi-Cal and have not had experience in | | | Provider | <ul style="list-style-type: none"> Clinical documentation train-the-trainer trainings are offered throughout the year and are for providers lead QA staff and Executive Managers (at least two per organization) |

²² A RU is a unique BHCS program identifier at a specific site used to enter services/billing data

| What needs to be completed? | Which programs does this apply to? | Does this apply? | Date complete? | Who is responsible? | Notes |
|---|---|------------------|----------------|---------------------|--|
| | this area, or may benefit from additional training | | | | <ul style="list-style-type: none"> Provider should check training schedule at http://www.acbhcs.org/providers/QA/Training.htm and be trained prior to providing services More information available here: http://www.acbhcs.org/providers/QA/qa_manual.htm |
| 12. Complete initial training on entering data into the electronic data entry and billing system with ACBH Information Systems (IS) | New programs/sites which will be assigned a RU for entry of services into an ACBH-approved data entry and claiming system, and have not had experience in this area or may benefit from additional training | | | Provider | <ul style="list-style-type: none"> This is set-up by ACBH after the required Initial Data Collection Training when the requests are submitted for ACBH system user authorization and staff identification numbers More information available here: http://www.acbhcs.org/providers/Insyst/Insyst.htm New program/site should have one week of service data to enter at the time of the training |
| 13. Complete initial training on Medi-Cal eligibility with ACBH Provider Relations | New programs/sites which will be billing to Medi-Cal and have not had experience in this area, or may benefit from additional training | | | Provider | <ul style="list-style-type: none"> This should occur within 1-2 weeks after the required Initial Data Collection Training This is set-up by ACBH after the required Initial Data Collection Training This is also called the Health Information Technician (HIT) Training |
| 14. Complete Medicare enrollment | New programs/sites which will be billing to Medi-Cal and serve adults over age 21 years and have not | | | Provider | <ul style="list-style-type: none"> This should be completed within one month of the start of services Enroll with Medicare at: https://www.cms.gov/ Provider Relations plays point on this on behalf of ACBH |

| What needs to be completed? | Which programs does this apply to? | Does this apply? | Date complete? | Who is responsible? | Notes |
|---|--|------------------|----------------|---|--|
| | had experience in this area, or may benefit from additional training | | | | <ul style="list-style-type: none"> Submit 7P10 to ACBH Provider Relations to start this process |
| 15. Complete training on billing to other health insurance from ACBH Provider Relations | New programs/sites which will be billing to Medi-Cal and have not had experience in this area, or may benefit from additional training | | | Provider | <ul style="list-style-type: none"> This should be completed within one month of the start of services This is set-up by ACBH after the required Initial Data Collection Training |
| 16. Participate in ACBH Continuous Quality Review Team (CQRT)/Authorization process | New providers or existing providers with new programs which will be billing to Medi-Cal | | | <ul style="list-style-type: none"> Provider ACBH QA | <ul style="list-style-type: none"> Contact QA 1-2 months prior to start up for TA and to schedule first CQRT meeting If new to documenting to Medi-Cal standard, providers participate in ACBH CQRT/Authorization process (approx. 3 hours monthly) for a minimum one-year period AND until provider demonstrates proficiency in clinical documentation and the authorization process If provider has experience documenting to Medi-Cal standards, the ACBH QA Office, after an assessment, may excuse the provider from participating in ACBH' CQRT or may require participation until proficiency is demonstrated. |

Who should I contact for questions/further information?

| ACBH Unit | Topic | Who to Contact |
|-----------|-------|----------------|
|-----------|-------|----------------|

| | | |
|-----------------------|---|--|
| IS | Entry of services into an ACBH-approved data entry and claiming system | Help desk, at: 510-567-8181 or HIS@acbhcs.org |
| Contracts Unit | Contract Negotiation/Contracting/Set-Up of New RUs | Assigned Contract Managers, specified online at: http://www.acbhcs.org/providers/network/docs/Contract_Management_Teams_List.pdf |
| Billings and Benefits | Initial Data Collection Training/Medi-Cal Eligibility/Medicare Enrollment/ Billing to Other Health Insurance | Contact main number, at 1-800-878-1313 to be routed appropriately |
| QA | Fire Clearance/Site Certification | QA Site Certification Team, at: SiteCertification@acgov.org |
| | Other QA/Documentation Questions | Assigned TA Contact, specified online at: http://www.acbhcs.org/providers/QA/QA.htm |

D. BID SUBMISSION CHECKLIST***BID SUBMISSION CHECKLIST***

All of the documentation listed below is required to be submitted with the Bid Response Packet in order for a bid to be deemed complete. Bidders shall submit all documentation in the order listed below and clearly labeled.

1. Table of Contents**2. Proposal Supporting Documentation****A. Exhibit A: Bidder Information and Acceptance:**

Bidders must select one box under Item 10 of Exhibit A Bidder Information and Acceptance Form and must fill out and submit a **signed** page of Exhibit A.

B. SLEB Partnering Information Sheet:

Every Bidder must fill out and submit a signed SLEB Partnering Information Sheet in the Bid Response Template, indicating their SLEB certification status. If Bidder is not certified, the name, identification information, and goods/services to be provided by the named CERTIFIED SLEB partner(s) with whom the Bidder will subcontract to meet the County SLEB participation requirement must be stated. Any CERTIFIED SLEB subcontractor(s) named, the Exhibit must be signed by the CERTIFIED SLEB(s) according to the instructions. All named SLEB subcontractor(s) must be certified by the time of bid submittal.

C. References:

Bidders are to provide a list of three current and three former references. If unable to provide the stated number of references, include justification in your bid submission as a separate attachment. References must be satisfactory as deemed solely by County. References should have similar scope, volume and requirements to those outlined in these specifications, terms and conditions.

D. Exhibit D: Exceptions, Clarifications, Amendments:

Indicate all of Bidder exceptions to the County's requirements, conditions and specifications as stated within this RFP. This shall include clarifications, exceptions and amendments, if any, to the RFP and associated Bid Documents. THE COUNTY IS UNDER NO OBLIGATION TO ACCEPT ANY EXCEPTIONS, AND SUCH EXCEPTIONS MAY BE A BASIS FOR BID DISQUALIFICATION.

3. Proposal Narrative (must not exceed 25 pages)**A. Letter of Transmittal/Executive Summary:**

Bidders should use this document to provide a synopsis of the highlights and benefits of their bid, clearly indicating the proposed Service(s).

B. Bidder Minimum Qualifications:

Bidders must demonstrate how they meet all of the criteria.

C. Bidder Experience, Ability and Plan:

Bidders must respond to all questions in this section of the narrative proposal.

D. Implementation Schedule and Plan:

Bidders must respond to all questions in this section of the narrative proposal.

E. Budget Narrative:

Budget narrative must match Exhibit B-1 Budget.

4. Exhibit B-1: Budget:

Bidders must complete all tabs in the budget workbook.

5. Attachments:

Bidders must submit all attachments as part of their bid packet.

A. Attachment 1: Organizational Chart

A complete Bid Response Packet must include:

- A single PDF copy of the proposal. Proposal is to be clearly marked on the cover (it should be clear who the Bidder is and what service is being bid on, on the front of the proposal);
 - The original proposal must include evidence that the person(s) who signed the proposal is/are authorized to execute the proposal on behalf of the Bidder. A signed statement by either the Executive Director or the Board President on an agency letterhead will meet this requirement.
- An electronic Excel copy of the completed Exhibit B-1 Program Budget, saved with the Bidder's name.

B. EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE**Bidder Information and Acceptance**

1. The undersigned declares that the proposal documents, including, without limitation, the RFP, Addenda and Exhibits have been read and accepted.
2. The undersigned declares that he/she is authorized, offers, and agrees to furnish the articles and/or services specified in accordance with the RFP's specifications, terms & conditions.
3. The undersigned has reviewed the proposal documents and fully understands the requirements in this proposal including, but not limited to, the requirements under the County Provisions, and that each Bidder who is awarded a contract shall be, in fact, a prime contractor, not a subcontractor, to the County, and agrees that its proposal, if accepted by County, will be the basis for the Bidder to enter into a contract with County in accordance with the intent of the proposal.
4. The undersigned also agrees to follow the Bid Protests / Appeals Process.

Alameda County prides itself on the establishment of fair and competitive contracting procedures and the commitment made to follow those procedures. The following is provided in the event that Bidders wish to protest the proposal process or the recommendation to award a contract for these programs once the Notices of Intent to Award/Non-Award have been issued.

The following describes two separate processes: Bid Protests and Appeals. Bid Protests submitted prior to issuance of the Notices of Intent to Award/Non-Award shall not be accepted by the County.

Bid Protests from any Bidder related to this RFP must be submitted in writing to the ACBH Director located at 2000 Embarcadero Cove, Suite 400, Oakland, CA 94606 Fax: 510.567.8180, before 5:00 p.m. of the **fifth (5th)** business day **following the date of issuance of the Notice of Intent to Award/Non-Award, not the date it is received by the Bidder**. Any Bid Protest received after 5:00 p.m. shall be considered received as of the next business day.

- The Bid Protest must contain a complete statement of the reasons and facts for the protest.
- The Bid Protest shall refer to the specific portions of documents that form the basis for the protest.
- The Bid Protest shall include the name, address, email address, fax number and telephone number of the person representing the protesting party.
- ACBH shall transmit a copy of the Bid Protest to all Bidders as soon as possible after receipt of the protest.

Upon receipt of written Bid Protest, the ACBH Director, or designee shall review and evaluate the protest and issue a written decision. The ACBH Director, may, at his or her discretion, investigate the protest, obtain additional information, provide an opportunity to settle the

protest by mutual agreement, and/or schedule a meeting(s) with the protesting Bidder and others (as determined appropriate by the ACBH Director) to discuss the Bid Protest. The decision on the proposal protest shall be issued at least ten (10) business days prior to the date the Board is considering the recommendation and award of contract.

The decision on the Bid Protest shall be communicated by e-mail, fax, or US Postal Service mail, and shall inform the Bidder whether or not the recommendation to the Board of Supervisors as stated in the Notice of Intent to Award is going to change. A copy of the decision shall be furnished to all Bidders affected by the decision. As used in this paragraph, a Bidder is affected by the decision on a Bid Protest if a decision on the Bid Protest could have resulted in the Bidder not being the recommended successful Bidder on the RFP.

The decision of the ACBH Director on the Bid Protest may be appealed to the Auditor-Controller's Office of Contract Compliance & Reporting (OCCR) located at 1221 Oak St., Rm. 249, Oakland, CA 94612, Fax: 510.272.6502 unless the OCCR determines that it has a conflict of interest in which case an alternate will be identified to hear the appeal and all steps to be taken by OCCR will be performed by the alternate. The Bidder whose proposal is the subject of the Bid Protest, all Bidders affected by the ACBH Director's decision on the Bid Protest, and the protesting Bidder have the right to appeal if not satisfied with the ACBH Director's Bid Protest decision. **All Appeals to the Auditor-Controller's OCCR shall be in writing and submitted within five (5) business days following the issuance of the decision by the ACBH Director, not the date received by the Bidder.** Appeals received after 5:00 p.m. is considered received as of the next business day.

- The Appeal shall specify the Bid Protest decision being appealed and all the facts and circumstances relied upon in support of the Appeal.
- In reviewing Appeals, the OCCR shall not re-judge the proposals. The appeal to the OCCR shall be limited to review of the procurement process to determine if the contracting department materially erred in following the RFP or, where appropriate, County contracting policies or other laws and regulations.
- The Appeal to the OCCR also shall be limited to the grounds raised in the original Bid Protest and the decision by the ACBH Director. As such, a Bidder is prohibited from stating new grounds for a Bid Protest in its Appeal. The Auditor-Controller (OCCR) shall only review the materials and conclusions reached by the GSA-Office of Acquisition Policy or department designee, and will determine whether to uphold or overturn the protest decision.
- The Auditor's Office may overturn the results of a bid process for ethical violations by Procurement staff, County Selection Committee members, subject matter experts, or any other County staff managing or participating in the competitive bid process, regardless of timing or the contents of a bid protest.
- The decision of the Auditor-Controller's OCCR is the final step of the Appeal process. A copy of the decision of the Auditor-Controller's OCCR shall be furnished to the protestor, the Bidder whose proposal is the subject of the Bid protest, and all Bidders affected by the decision.

The County shall complete the Bid Protest/Appeal procedures set forth in this before a recommendation to award the contract is considered by the Board of Supervisors.

The procedures and time limits set forth in this section are mandatory and are each Bidder's sole and exclusive remedy in the event of Bid Protest. A Bidder's failure to timely complete both the Bid Protest and Appeal procedures shall be deemed a failure to exhaust administrative remedies. Failure to exhaust administrative remedies, or failure to comply otherwise with these procedures, shall constitute a waiver of any right to further pursue the Bid Protest, including filing a Government Code Claim or legal proceedings.

5. The undersigned agrees to the following terms, conditions, certifications, and requirements found on the County's website:

- **Debarment / Suspension Policy:**
<http://www.acgov.org/gsa/departments/purchasing/policy/debar.htm>
- **Iran Contracting Act (ICA) of 2010:**
<http://www.acgov.org/gsa/departments/purchasing/policy/ica.htm>
- **General Environmental Requirements:**
<http://www.acgov.org/gsa/departments/purchasing/policy/envIRON.htm>
- **Small Local Emerging Business Program:**
<http://acgov.org/auditor/sleb/overview.htm>
- **First Source:** <http://www.acgov.org/auditor/sleb/sourceprogram.htm>
- **Online Contract Compliance System:** <http://acgov.org/auditor/sleb/elation.htm>
- **General Requirements:**
<http://www.acgov.org/gsa/departments/purchasing/policy/genreqs.htm>
- **Proprietary and Confidential Information:**
<http://www.acgov.org/gsa/departments/purchasing/policy/proprietary.htm>

6. The undersigned also acknowledges that Bidder will be in good standing in the State of California, with all the necessary licenses, permits, certifications, approvals, and authorizations necessary to perform all obligations in connection with this RFP and associated proposal documents.

7. It is the responsibility of each Bidder to be familiar with all of the specifications, terms and conditions and, if applicable, the site condition. By the submission of a proposal, the Bidder certifies that if awarded a contract they will make no claim against the County based upon ignorance of conditions or misunderstanding of the specifications.

8. Patent indemnity: Bidders who do business with the County shall hold the County of Alameda, its officers, agents and employees, harmless from liability of a 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.

9. Insurance certificates are not required at the time of submission. However, by signing Exhibit A – Bidder Information and Acceptance, the Contractor agrees to meet the minimum insurance requirements stated in the RFP. This documentation must be provided to the County, prior to award, and shall include an insurance certificate and additional insured certificate, naming the County of Alameda, which meets the minimum insurance requirements, as stated in the RFP.

10. The undersigned also acknowledges **ONE** of the following. Please check only one box.

- Bidder is not local to Alameda County and is ineligible for any bid preference; **OR**
- Bidder is a certified SLEB and is requesting 10% bid preference; (Bidder must check the first box and provide its SLEB Certification Number in the SLEB PARTNERING INFORMATION SHEET); **OR**
- Bidder is LOCAL to Alameda County and is requesting 5% bid preference, and has attached the following documentation to this Exhibit:
- Copy of a verifiable business license, issued by the County of Alameda or a City within the County; and
 - Proof of six (6) months business residency, identifying the name of the bidder and the local address. Utility bills, deed of trusts or lease agreements, etc., are acceptable verification documents to prove residency.

| EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE | | | |
|---|--|-----------------------|--|
| Official Name of Bidder | | | |
| Street Address Line 1 | | | |
| Street Address Line 2 | | | |
| City | | State | Zip |
| Webpage | | | |
| Type of Entity/Organizational Structure | <input type="checkbox"/> Corporation | | <input type="checkbox"/> Joint Venture |
| | <input type="checkbox"/> Limited Liability Partnership | | <input type="checkbox"/> Partnership |
| | <input type="checkbox"/> Limited Liability Corporation | | <input type="checkbox"/> Non-Profit / Church |
| | <input type="checkbox"/> Other | | |
| Jurisdiction of Organizational Structure | | | |
| Date of Organizational Structure | | Federal Tax ID Number | |
| CEO or ED Name | | Title | |
| Phone Number | | Fax Number | |
| Email | | | |
| Signature | | Title | |
| Dated this | day of | 20 | |
| RFP Contact | | Title | |
| Phone Number | | Email | |

EXHIBIT C: INSURANCE REQUIREMENTS

Insurance certificated are not required at the time of submission; however, by signing Exhibit A – Bidder Information and Acceptance, the Bidder agrees to meet the minimum insurance requirements stated in the RFP, prior to award. This documentation must be provided to the County, prior to awards, and shall include insurance certificate and additional insured certificate, naming County of Alameda, which meets the minimum insurance requirements, as stated in the RFP.

The following page contains the minimum insurance limits, required by the County of Alameda, to be held by the Contractor performing on this RFP:

*****SEE NEXT PAGE FOR COUNTY OF ALAMEDA MINIMUM INSURANCE REQUIREMENTS*****

COUNTY OF ALAMEDA MINIMUM INSURANCE REQUIREMENTS

Without limiting any other obligation or liability under this Agreement, the Contractor, at its sole cost and expense, shall secure and keep in force during the entire term of the Agreement or longer, as may be specified below, the following minimum insurance coverage, limits and endorsements. The County reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances. If the contractor maintains broader coverage and/or higher limits than the minimums shown below, the County requires and shall be entitled to the broader coverage and/or the higher limits maintained by the Contractor. Any available insurance proceeds in excess of the specified minimum limits of insurance and coverage shall be available to the County.

| TYPE OF INSURANCE COVERAGES | | MINIMUM LIMITS |
|-----------------------------|--|---|
| A | Commercial General Liability Premises Liability; Products and Completed Operations; Contractual Liability; Personal Injury and Advertising Liability; Abuse, Molestation, Sexual Actions, and Assault and Battery | \$1,000,000 per occurrence (CSL) Bodily Injury and Property Damage |
| B | Commercial or Business Automobile Liability All owned vehicles, hired or leased vehicles, non-owned, borrowed and permissive uses. Personal Automobile Liability is acceptable for individual contractors with no transportation or hauling related activities | \$1,000,000 per occurrence (CSL) Any Auto Bodily Injury and Property Damage |
| C | Workers' Compensation (WC) and Employers Liability (EL) Required for all contractors with employees | WC: Statutory Limits EL: \$1,000,000 per accident for bodily injury or disease |
| D | Professional Liability/Errors & Omissions Includes endorsements of contractual liability and defense and indemnification of the County | \$1,000,000 per occurrence \$2,000,000 project aggregate |

E Endorsements and Conditions:

1. **ADDITIONAL INSURED:** County of Alameda, its Board of Supervisors, the individual members thereof, and all County officers, agents, employees, volunteers, and representatives are to be covered as additional insureds on the CGL policy with respect to liability arising out of work or operations performed by or on behalf of the Contractor including materials, parts, or equipment furnished in connection with such work or operations. General liability coverage can be provided in the form of an endorsement to the Contractor's insurance (at least as broad as ISO Form CG 20 10 11 85 or if not available, through the addition of both CG 20 10, CG 20 26, CG 20 33, or CG 20 38; and CG 20 37 if a later edition is used). Auto policy shall contain, or be endorsed to contain additional insured coverage for the County.
2. **DURATION OF COVERAGE:** All required insurance shall be maintained during the entire term of the Agreement. In addition, Insurance policies and coverage(s) written on a claims-made basis shall be maintained and evidence of insurance must be provided during the entire term of the Agreement and for at least five (5) years following the later of termination of the Agreement and acceptance of all work provided under the Agreement, with the retroactive date of said insurance (as may be applicable) concurrent with the commencement of activities pursuant to this Agreement. If coverage is cancelled or non-renewed, and not replaced with another claims-made policy form with a Retroactive Date prior to the contract effective date, the Contractor must purchase "extended reporting" coverage for a minimum of five (5) years after completion of work. Proof of workers' compensation insurance coverage is not required if contractor provides a signed Workers Compensation Written Declaration of Compliance.
3. **REDUCTION OR LIMIT OF OBLIGATION:** All insurance policies, including excess and umbrella insurance policies, shall be primary and non-contributory coverage at least as broad as ISO CG 20 10 04 13 as respects the County, its officers, officials, employees, or volunteers. Any insurance or self-insurance maintained by the County, its officers, officials, employees, or volunteers shall be excess of the Contractor' insurance and shall not contribute with it. Pursuant to the provisions of this Agreement insurance effected or procured by the Contractor shall not reduce or limit Contractor's contractual obligation to indemnify and defend the Indemnified Parties.
4. **INSURER FINANCIAL RATING:** Insurance shall be maintained through an insurer with an A.M. Best Rating of no less than A:VII or equivalent, shall be admitted to the State of California unless otherwise acceptable by Risk Management, and with deductible amounts acceptable to the County. Acceptance of Contractor's insurance by County shall not relieve or decrease the liability of Contractor hereunder. Self-insured retentions must be declared and approved. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of the Contractor. The policy language shall provide or be endorsed to provide, that the self –insured retention may be satisfied by either the named insured or County.
5. **SUBCONTRACTORS:** Contractor shall include all subcontractors as an insured (covered party) under its policies or shall verify that the subcontractor, under its own policies and endorsements, has complied with the insurance requirements in this Agreement, including this Exhibit.
6. **JOINT VENTURES:** If Contractor is an association, partnership or other joint business venture, required insurance shall be provided by one of the following methods:
 - Separate insurance policies issued for each individual entity, with each entity included as a "Named Insured" (covered party), or at minimum named as an "Additional Insured" on the other's policies. Coverage shall be at least as broad as in the ISO Forms named above.
 - Joint insurance program with the association, partnership or other joint business venture included as a "Named Insured".
7. **CANCELLATION OF INSURANCE:** Each insurance policy required above shall provide that coverage shall not be cancelled, except with notice of cancellation provided to the County in accordance with policy terms and conditions.
8. **CERTIFICATE OF INSURANCE:** Before commencing operations under this Agreement, Contractor shall provide Certificate(s) of insurance and applicable insurance endorsements as set forth in the provisions of this Agreement and this Exhibit C, in forms satisfactory to County, evidencing that all required insurance coverage is in effect. However, failure to obtain the required documents prior to the work beginning shall not waive the Contractor's obligation to provide them. The County reserves the right to require the Contractor to provide complete, certified copies of all required insurance policies, including endorsements required by these specifications, at any time.

B. SLEB PARTNERING INFORMATION SHEET

**SMALL LOCAL EMERGING BUSINESS (SLEB)
PARTNERING INFORMATION SHEET**

In order to meet the Small Local Emerging Business (SLEB) requirements of this RFP, all bidders must complete this form as required below. Bidders not meeting the [definition of a SLEB \(http://acgov.org/auditor/sleb/overview.htm\)](http://acgov.org/auditor/sleb/overview.htm) are required to subcontract with a SLEB for at least 20% of the total estimated bid amount in order to be considered for contract award. SLEB subcontractors must be independently owned and operated from the prime Contractor with no employees of either entity working for the other. This form must be submitted for each business that bidders will work with, as evidence of a firm contractual commitment to meeting the SLEB participation goal. (Copy this form as needed.)

Bidders are encouraged to form a partnership with a SLEB that can participate directly with this contract. One of the benefits of the partnership will be economic, but this partnership will also assist the SLEB to grow and build the capacity to eventually bid as a prime on their own.

Once a contract has been awarded, bidders will not be able to substitute named subcontractors without prior written approval from the Auditor-Controller, Office of Contract Compliance & Reporting (OCCR).

County departments and the OCCR will use the web-based Elation Systems to monitor contract compliance with the SLEB program (Elation Systems: <http://www.elationsys.com/elationsys/>).

| |
|--|
| <input type="checkbox"/> BIDDER IS A CERTIFIED SLEB (sign at bottom of page) SLEB BIDDER Business Name: _____ SLEB Certification #: _____ SLEB Certification Expiration Date: _____ NAICS Codes Included in Certification: _____ |
|--|

| |
|---|
| <input type="checkbox"/> BIDDER IS <u>NOT</u> A CERTIFIED SLEB AND WILL SUBCONTRACT _____% WITH THE SLEB NAMED BELOW FOR THE FOLLOWING GOODS/SERVICES: _____ SLEB Subcontractor Business Name: _____ SLEB Certification #: _____ SLEB Certification Expiration Date: _____ SLEB Certification Status: <input type="checkbox"/> Small / <input type="checkbox"/> Emerging NAICS Codes Included in Certification: _____ SLEB Subcontractor Principal Name: _____ SLEB Subcontractor Principal Signature: _____ Date: _____ |
|---|

| |
|--|
| <p>Upon award, prime Contractor and all SLEB subcontractors that receive contracts as a result of this bid process agree to register and use the secure web-based ELATION SYSTEMS. ELATION SYSTEMS will be used to submit SLEB subcontractor participation including, but not limited to, subcontractor contract amounts, payments made, and confirmation of payments received.</p> |
|--|

Bidder Printed Name/ Title: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Bidder Signature: _____ Date: _____

C. BIDDER REFERENCES

Provide three current and three former references that Bidder worked with on a similar scope, volume and requirements to those outlined in this RFP. Bidders must verify that the contract information for all references provided in current and valid. Bidders are strongly encouraged to notify all references that the County may be contacting them to obtain a reference.

The County may contact some or all of the references provided in order to determine Bidder's performance record on work similar to that described in this request. The County reserves the right to contact references other than those provided in the proposal and to use the information gained from them in the evaluation process.

Current References

| Bidder Name | |
|---|-------------------|
| 1. | |
| Company Name: | Contact Person: |
| Address: | Telephone Number: |
| City, State, Zip: | E-mail Address: |
| Services Provided / Date(s) of Service: | |
| 2. | |
| Company Name: | Contact Person: |
| Address: | Telephone Number: |
| City, State, Zip: | E-mail Address: |
| Services Provided / Date(s) of Service: | |
| 3. | |
| Company Name: | Contact Person: |
| Address: | Telephone Number: |
| City, State, Zip: | E-mail Address: |

| | | |
|--|---|--|
| | Services Provided / Date(s) of Service: | |
|--|---|--|

Former References

| Bidder Name | |
|---|-------------------|
| 1. | |
| Company Name: | Contact Person: |
| Address: | Telephone Number: |
| City, State, Zip: | E-mail Address: |
| Services Provided / Date(s) of Service: | |
| 2. | |
| Company Name: | Contact Person: |
| Address: | Telephone Number: |
| City, State, Zip: | E-mail Address: |
| Services Provided / Date(s) of Service: | |
| 3. | |
| Company Name: | Contact Person: |
| Address: | Telephone Number: |
| City, State, Zip: | E-mail Address: |
| Services Provided / Date(s) of Service: | |

D. EXHIBIT D: EXCEPTIONS, CLARIFICATIONS, AMENDMENTS

This shall include clarifications, exceptions and amendments, if any, to the RFP and associated Bid Documents, and shall be submitted with your bid response using the template on this page of the Exhibit A – Bid Response Packet. THE COUNTY IS UNDER NO OBLIGATION TO ACCEPT ANY EXCEPTIONS, AND SUCH EXCEPTIONS MAY BE A BASIS FOR BID DISQUALIFICATION.

Bidder Name: _____

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

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

| Reference to | | | Description |
|--------------|---------|----------|-------------------------------------|
| Page No. | Section | Item No. | |
| p. 23 | D | 1.c. | <i>Bidder takes exception to...</i> |
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*Print additional pages as necessary