Outpatient Addiction Services Request For Proposal
Question & Answer

1. What does ASAM stand for?
   a. ASAM stands for American Society of Addiction Medicine. Pennsylvania recently transitioned to using ASAM for all substance use treatment programs, assessments, and level of care determinations.

2. What does DDAP stand for?
   a. DDAP stands for Department of Drug and Alcohol Programs. DDAP is the state-level governing body for all drug and alcohol programs in Pennsylvania. DDAP handles the licensure for all drug and alcohol programs in Pennsylvania.

3. Can we have copies of the slides presented during the bidder’s conference on 6/19/19?
   a. Slides presented during the bidder’s conference are unavailable for public dispersion. There is no new information presented in the bidder’s conference slides; please refer to the RFP and this Q&A.

4. Will we be able to see an example of a previously funded RFP, i.e. sample proposal?
   a. No. Previously funded RFPs are the applicant’s proprietary information and therefore cannot be shared with the public. Sample proposals are not available for review.

5. Should the provider be both licensed and operational by the target date in September?
   a. It is expected that a timeline be included in the proposal which speaks to the ability to have the program operational, i.e. ability to provide full array of required services, by September 16, 2019. Therefore, the provider is expected to be licensed and operational by September 16, 2019. (Please note the error on page 25 of the RFP, section V.D.2.)

6. To meet the September target date, can an applicant have licensure only?
   a. It is expected that a timeline be included in the proposal which speaks to the ability to have the program operational, i.e. ability to provide full array of required services, by September 16, 2019. Therefore, the provider is expected to be licensed and operational by September 16, 2019. (Please note the error on page 25 of the RFP, section V.D.2.)

7. What is the expected start date for the program to be fully functional?
   a. September 16, 2019. There will be no exceptions. Applicants should include a timeline in their proposal which shows their plan to be fully operational by September 16, 2019.

8. If applicants have unoccupied space that would need modifications to deliver the targeted services, will there be time given to bring the building up to code and go through the licensing process?
   a. It is expected that a timeline be included in the proposal which speaks to the ability to have the program operational, i.e. ability to provide full array of required services, by September 16, 2019. Therefore, the provider is expected to be licensed and operational by September 16, 2019. (Please note the error on page 25 of the RFP, section V.D.2.)
   b. No additional time will be granted to bring these services up to operational order.
9. Do all the included zip codes identified within the RFP receive bonus points?
   a. The zip codes listed in the RFP will receive bonus points during the review process. These zip codes are: 19115, 19142, 19143, 19145, 19146, 19147, 19153. Those applicants with sites located outside of these zip codes are also encouraged to apply, however they will not receive bonus points during the review process. If your site is located outside of the identified zip codes listed here, please include a rationale for the need for services in that area.

10. Is this procurement looking to expand a specific medication assisted treatment?
    a. CBH is open to all forms of FDA-approved medications for substance use disorders, though this RFP is seeking programs that can provide direct provision of FDA-approved medications for opioid use disorder.

11. What is meant by ‘co-occurring capable’?
    a. Please reference the ASAM criteria text.

12. Is this RFP open to ASAM 2.1 (Intensive Outpatient Services)?
    a. No. CBH is looking to expand ASAM 1 Outpatient Services only. Please reference ASAM, Third Edition for details on this service.

13. Would a satellite location be accepted?
    a. DDAP does not issue satellite licensure. A new DDAP license must be obtained for this program.

14. How many programs can be funded through procurement (per provider)?
    a. There is not a specific number of programs (nor programs per provider), but rather CBH will examine the overall capacity of respondents and make a determination regarding how many programs will be selected. Respondents should address the specific capacity of their respective program when indicating the “capacity of services” within the Proposal Content section of their response.

15. Is start-up funding available?
    a. No start-up funding is available for this project.

16. If we are interested in expanding our hours at an existing program, should we apply to this RFP?
    a. Expansion of hours to existing services does not require submission of proposal to this RFP.

17. Can a new provider, i.e. a provider who is not currently contracted with CBH, submit a proposal in response to the RFP?
    a. Yes.

18. How will services be reimbursed?
    a. CBH will utilize a Fee-for-service reimbursement structure that aligns with existing standard rates for in-network community-based addictions treatment services.

19. If we are looking at multiple sites in different zip codes can we combine for one application or do we need a separate application for each location?
    a. Please feel free to combine these sites into one proposal, including a rationale for why each site location is needed for the community.