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 or will it be OK to have just a license to meet requirements by 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.

6. Is there a 16-bed maximum on these programs per IMD?
   a. The 1115 Waiver addressed the Institution of Mental Disease 16 bed limit issue within the substance use treatment network. There is no 16-bed limit.

7. Can a provider apply for this procurement if they want to expand their current operations, i.e. apply for expanded licensure through DDAP?
   a. Yes, provided all other requirements are met.

8. Does the active license and/or active program have to be at the same site?
   a. Yes. We are looking for active programs which are up and running and ready to accept CBH members now.

9. Applicants are required to limit their general narrative description to 7 single spaced pages. If section one and two do not fill a full page each can we print them sequentially and use the space for other items?
   a. If the Introduction/Executive Summary (V.D.1.; Section 1) and/or Statement of Qualification (V.D.2.; Section 2) do not fill a full page, applicants can print/type them sequentially/immediately following one another without any blank space.
b. There is no need to use page breaks between these sections. Both sections are not to exceed 1 page each.

c. Proposal content should follow section V.D. in the RFP. Introduction/Executive Summary (V.D.1.) should not exceed 1 page. Statement of Qualification (V.D.2.) should not exceed 1 page.

d. Proposals must be prepared simply and economically.

10. If we are an out-of-network contracted provider with CBH, do we have to be smoke-free to be awarded this RFP?
   a. Yes. Providers and programs that are seeking to enter the network via this RFP must meet the Tobacco Wellness Recovery Initiative criteria for a smoke-free facility at the time of operation.