

Question #1. We have contracts with more than one district. Do you require a monitoring report from each district or just a local one as an attachment?

Answer to Question #1: It is sufficient to supply reports from this district.

Question #2. Does the statement that BOP inmates residing at federal or contracted community treatment centers mean that the BOP will be piggy backing on these contracts? Are we talking about BOP residents at the Coolidge House? What other community treatment centers exist that will be included in these contracts?

Answer to Question #2. While it is noted in the Statement of Work that the Bureau of Prisons may issue a program plan authorizing services on each Blanket Purchase Agreement, it is rare that this will occur as the Bureau of Prisons has a contract with a local agency to provide services to offenders housed in local Residential Re-Entry Centers. Coolidge House is presently the only contract provider in MA as a Residential Re-entry Center.

Question #3.: My organization provides outpatient mental health treatment as an accredited outpatient clinic licensed by the MA Department of Public Health. I'm writing to inquire whether organizations chosen to provide services for this RFP will be required to provide them all – urine collection, substance abuse treatment, as well as the other services listed. Or, can we apply to provide only the mental health treatment?

Answer to Question #3. Vendors must be able to provide the services identified in Part B of each solicitation in the catchment area where they are located. It is noted, that the District of Massachusetts separates services in the solicitations.

Question #4. Do vendors need to provide all of the services listed in section B? For example, individual counseling, group counseling (w/localized definitions), medication management, etc. It seems to be the case that the vendor must offer all services?

Answer to Question #4. Vendors must be able to provide the services identified in Part B of each solicitation in the catchment area where they are located. Vendors who have multiple locations, will need to submit a proposal for each catchment area where they want to bid for services. In some areas, vendors may have to submit two proposals, one for substance abuse services and one for mental health services, even if the same office/site will be providing both services.

Question #5. Are the anticipated quantities localized to vendor or to region? For example, in 0101-18-SA3, the anticipated number of 50 Group Counseling (2020) monthly sessions are listed. Does this anticipated number apply to a vendor or to the region as a whole? I do understand that anticipated numbers are estimates and not guaranteed.

Answer to Question #5. In most instances where there is an existing Blanket Purchase Agreement, estimated monthly quantities ("EMQs") were derived from a report that calculated the figures from actual services provided in a six month period (December 2016 through May 2017) for that catchment area. So the EMQs are specific for that catchment area identified in the solicitation on page 2, Section B, at the end of the first paragraph.

Question #6. For the group modalities for SA and MH RFPs, must the groups be dedicated to the target population or may enrollees join in existing IOP and group counseling programs?

Answer to Question #6. The groups need not be dedicated to federal defendant/offenders. It is preferred if defendant/offenders can join in existing groups at the vendor's sites.

Question #7. Related to staffing licensure for MH services, it seems that a masters-level staff can conduct the Intake Assessment & Report under licensed supervision; however, individual sessions require licensure. May masters-level staff operating under licensed supervision also provide the individual and group modalities; or, is licensure required?

Answer to Question #7. Licensure is required for staff providing individual and group mental health treatment.

Question #8. I am reaching out with a question regarding the solicitation for Sex Offender Specific Treatment. After reading through the solicitation, I did not notice requirements for office location beyond reference of the county in each solicitation title. Are there more detailed requirements in terms of location, accessibility, proof of location, etc.?

Answer to Question #8: In Part C of the Statement of Work, there is a Facility Requirement:

The vendor shall ensure that its facility(ies) has adequate access for defendants/offenders with physical disabilities.

In Section E.1. Vendors Performance (Mandatory Requirement)

The vendor or subcontractor shall:

(a) Maintain a physical facility that meets all applicable federal, state and local regulations (e.g., building codes), and

(c) Provide physical facilities that preserve both the integrity of the confidential relationship and the personal dignity of the client.

Vendors are also encouraged to read Section L. b-c regarding this matter.

Lastly, vendors will be evaluated by Section M- part of which has a site section.

Question #9. Does the office location have to be in the town of the RFR (ie, Plymouth)? What is the best way to identify the catchment area?

Answer to Question #9. The catchment area is located at the end of the first paragraph in Part B.

Question #10. Vendor X is in the process of reviewing Solicitation #0101-2018-IP6. The Request for Proposal states in some places that vendors must be capable of providing all services

(Medical Detoxification, Short-Term Residential and Long-Term Residential). On page C- 4 of 22, the RFP states that the vendor shall provide one of the services. Below is the question we are requesting clarification on.

Are vendors required to provide all three services listed in the RFP (Medical Detoxification, Short-Term Residential Treatment and Long-Term Residential Treatment)? Will vendors submitting a proposal to provide only Medical Detoxification services be considered?

Answer to Question #10. The only service that is being solicited under 0101-2018-IP6 is Medical Detoxification. As noted in Part B, only those services marked by a "x" under the Required Services column are being solicited.

Question #11. 0101-2017-SO1: How many exams can we expect to run during the course of 12 month period.

Answer to Question #11: Per Section B, the District of Massachusetts is looking to award between 1 to 3 vendors to provide polygraph examinations. Based on historical data, it is estimated that there will be authorizations for 12- 13 examinations a month. Depending on the number of vendors we award on this BPA, will depend on how many examinations one vendor will have to provide.

Question #12: 0101-2017-SO1: Can the Examiner run the exams in various US Probation Offices?

Answer to Question #12: Vendors must have their own space to provide examinations. However, per the local needs requirement, upon request, the vendor shall also have the ability to provide an examination in any US Probation & Pretrial Services office upon request.

Question #13: Related to Attachment C, how do you define “all staff performing services”? Do I need to include administrative staff there? What about kitchen staff who may work with clients in our residential programs? Drivers? Do I include persons in our contracts and billing office?

Answer to Question #13: "All staff performing services" applies to staff providing the clinical interventions under the project codes in Section B. Proposals do not need to provide details regarding drivers, administrative staff, cleaning staff, kitchen staff, or persons in the vendor's billing department.

Question #14: Are you looking for the proposal to send copies of clinical licenses or just a list of credentials for each clinical staff person?

Answer to Question #14: Per the Offeror's Staff Qualifications form, Attachment C, Offeror's shall prepare and submit credentials, including licenses and certifications with the completion of form. Note, the Offeror shall also note what project code(s) each staff will be performing.

Question #15: On the MH solicitation I am assuming that we do not submit a cost for the client transportation expense, per unit in that it will be determined by a standard approved cost.

Answer to Question #15: Correct- the cost will be the actual cost of the least expensive means to transport various clients to and from treatment if authorized on the program plan.

Question #16: Is telehealth acceptable and if so for which service codes? The trend has been to utilize it for med monitoring and psych evaluations but we wanted to see if that is acceptable.

Answer to Question #16: Telehealth is not billable under the Statement of Work except in extraordinary circumstances approved by the Office of Probation & Pretrial Services. Per the Statement of Work, only face-to-face contacts between practitioner and defendant/offender (or family) are invoiced.

Question #17: Who is the current vendor and can we get copies of the current contracts?
Boston, North of Boston, North Shore, South Shore, Worcester, and the Cape.

Answer to Question #17:

Area	Vendor	Total Evaluated Cost
Boston	Hope House	\$55,400 (1 year Non-Competitive PO)
N of Boston	Commonwealth Center for Consultation& Psychotherapy	\$246,480.00
N Shore	Northeast Behavioral Health/Lahey	\$67,164.00
S Shore	No Current Vendor	N/A
Worcester	Spectrum Health Systems	\$36,954.00
Cape	No Current Vendor	N/A

Question #18: Do you know if psychiatric nurse practitioners can do the evaluations and prescribing for psychiatry? This is acceptable practice in the community if supervised by a psychiatrist and we can do so in our BOP contracts but wanted to be sure it was acceptable for your contracts.

Answer to Question #18: Masters-level staff can conduct the Intake Assessment & Report under licensed supervision. Licensure is required for staff providing individual and group mental health treatment. Under Project Code 5030, the medical evaluation and report should be prepared by a licensed medical doctor/physician, a psychiatrist who specializes in disorders of the mind, or other qualified practitioner who is board-certified or board -eligible, and meets the standards of practice (i.e., academic training, residency, etc.) established by his/her state's regulatory board. Therefore, if the psychiatric nurse practitioner fits into this description, then it is acceptable.

Question #19: Any idea what the breakdown is regarding the type of criminal offenses these M/H clients have?

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Answer to Question #19: The range of convictions for Defendant/Offenders who have a mental health condition is very broad and can include all federal offenses.

Question #20: Regarding the “on-call” process, what is the scope of service expected?

Answer to Question #20: Per the Statement of Work, vendors shall provide for emergency services (e.g., after hours staff phone numbers, local hotline) for defendants/offenders when counselors are not available.

Question #21: Regarding the catchment areas, is there a more detailed description regarding the towns covered, i.e., North of Boston, Greater Boston, South Shore, Merrimack valley?

Answer to Question #21: Please see the attached map regarding the catchment areas.

Question #22: Are there any specific requirements for record keeping and use of software, specifically related to electronic records?

Answer to Question #22: If the vendor maintains an electronic file system, per the Statement of Work, the vendor shall make a hard copy of all files available for review immediately upon request of the USPO/USPSO or designee. There are no other specific requirements.