

**County of Alameda Behavioral Health Care Services
RFP No. 17-09, Addendum No. 2**

**COUNTY OF ALAMEDA BEHAVIORAL HEALTH CARE SERVICES (BHCS)
ADDENDUM No. 2**

**to
RFQ No. 17-09 UELP PEI Services**

**Specification Clarification/ Modification and Recap of the Networking/ Bidder's Conferences held on
Monday October 16, 2017 and Tuesday October 17, 2017**

This County of Alameda, General Services Agency (GSA), RFP/Q Addendum has been electronically issued to potential bidders via e-mail. E-mail addresses used are those in the County's Small Local Emerging Business (SLEB) Vendor Database or from other sources. If you have registered or are certified as a SLEB, please ensure that the complete and accurate e-mail address is noted and kept updated in the SLEB Vendor Database. This RFP/Q Addendum will also be posted on the GSA Contracting Opportunities website located at http://www.acgov.org/gsa/purchasing/bid_content/ContractOpportunities.jsp.

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The following Sections have been modified to read as shown below. Changes made to the original RFP document are in bold print and highlighted, and deletions made have a strike through.

CLARIFICATIONS & CORRECTIONS/CHANGES THAT PERTAIN TO...

I. RFP

- Section I. A. Intent pages 3 and 4: Language change

Priority Population	Service Area	Number of Contracts	Maximum Annual Amount Per Contract
Afghan	North and South	1 for North County and 1 for South County	\$280,000
African	North and South	1	\$290,000
Asian	Countywide North and South	2 2 for North County and 1 for South County	\$290,000
Filipino	Central and South	1	\$290,000
Middle Eastern and Arab Arabic Arab	North and Central	1	\$290,000
Native American	North and Central	1	\$290,000
Native Hawaiians, other Pacific Islanders and Filipino Native Hawaiians and Pacific Islanders	Countywide North and South	1	\$580,000 \$290,000
South Asian	County Wide	1	\$580,000
Southeast Asian	County Wide	1	\$580,000

~~BHCS will use this Request for Proposals (RFP) to establish ten contracts to provide UELP PEI services. Bidders may only apply to serve one priority population.~~

BHCS will use this Request for Proposals (RFP) to establish up to twelve contracts to provide UELP PEI services. Bidders may apply to serve no more than two priority populations. Successful bidders will only receive a maximum of one contract award with the exception of the Asian and Afghan populations wherein a bidder may receive up to two contract awards. More details can be found under Section II. G. Evaluation Criteria/Selection Committee.

BHCS intends to award up to twelve contracts totaling ~~\$3,750,000~~ **\$4,040,000** per contract year in Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) funds to support UELP PEI programs per contract year.

- Section I. C. Scope, page 5: Language added
At least 51 percent of the funds will be directed to children or youth who are zero to 25 **24 years old and their families.**
- Section I. F. 1. Understanding and Experience with Priority Population Needs on page 7: Language deleted and added

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The priority population for this RFP includes individuals residing in Alameda County who identify themselves as being part of the following communities—**identify as being from the following geographic areas (except Native American or American Indian):**

- Afghan;
 - African including Cameroon, Eritrea, Ethiopia, Kenya, Mali, Nigeria, and DR Congo;
 - Asian including China, Japan, Taiwan, Korea, Mongolia;
 - Middle Eastern and Arabic **Arab** including **Yemen, Lebanon, Jordan, Saudi Arabia**, Iran, Iraq, and Syria;
 - Native American or American Indian;
 - Native Hawaiians and other Pacific Islanders (~~NHOPI~~)—**(NHPI)** and **Filipino**;
 - **Filipinos**
 - South Asian including Bangladesh, India, Sri Lanka, ~~Hmong~~, Nepal, Pakistan and Bhutan;
 - Southeast Asian including Vietnam, Cambodia, Laos, Myanmar, Thailand, Malaysia and Brunei;
- Bidders should include their plan for serving recent refugees and immigrants in each priority population.

- Section I. F. 3. Planned Staffing and Organizational Infrastructure on page 10: Language changed For Service Area-specific programs including Afghan, African, Asian, Middle Eastern and Arabic **Arab**, Native American, **NHPI and Filipino** priority populations:

Data Clerk **Data Clerk/ Coordinator**

For County wide programs including ~~NHOPI and Filipino~~, South Asian and Southeast Asian priority populations.

- Section I. F. 3. Planned Staffing and Organizational Infrastructure on page 11: Language added The Mental Health Specialist shall be a language and culturally proficient member of the identified community with mental health expertise, **when appropriate and/or if available.**
- Section I. F. 5. Ability to Track Data and Outcomes on page 12: Language rearranged and added The awarded Contractors must provide a minimum of the following services:
*Service area specific priority populations including Asian, Afghan, African, **Filipino**, Middle Eastern and Arabic **Arab**, Native American, and **NHPI**:*

Provide mental health referrals and successful linkages to at least six clients annually.

- **At least 66 percent of those clients who receive referrals will successfully link with the services referred to. The awarded Contractors shall track any mental health referrals and enter referrals made within BHCS system in the County's electronic data base, currently Clinicians Gateway.**

Countywide priority populations including ~~NHOPI and Filipinos~~, South Asian and Southeast Asian:

- Section I. F. 5. Ability to Track Data and Outcomes on page 13: Language rearranged and added The awarded Contractors must provide a minimum of the following services:

Provide mental health referrals and successful linkages to at least twelve clients annually.

- **At least 66 percent of those clients who receive referrals will successfully link with the services referred to. The awarded Contractors shall track any mental health referrals and enter referrals made within BHCS system in the County's electronic data base, currently Clinicians Gateway.**

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- Section II. B. Calendar of Events on page 15

Event	Date/Location	
Request for Proposals (RFP) Issued	Monday October 9, 2017	
Bidder's Written Questions Due	By 5:00 pm on the day of 2 nd Bidder's Conference – BHCS strongly encourages Bidders to submit written questions earlier.	
1 st Bidders' Conference	Monday October 16, 2017	9:30 am – 11:00 am 2000 Embarcadero Cove, Oakland Gail Steele Room
2 nd Bidders' Conference	Tuesday October 17, 2017	2:00 pm – 3:30 pm 951 Turner Court, Hayward Conference Room 230ABC
Addendum 1 Issued	Tuesday October 24, 2017	
Addendum 2 Issued	Thursday October 26, 2017	
Proposals Due	Thursday November 9, 2017 by 2:00 pm	
Review/Evaluation Period	Thursday November 9, 2017 – Tuesday December 19, 2017	
Oral Interviews (as needed)	<p>Tuesday December 12, 2017: Evaluation Panel 1 – African, Native American and NHPI</p> <p>Thursday December 14, 2017: Evaluation Panel 2 - Afghan, Middle Eastern & Arabic Arab and South Asian</p> <p>Tuesday December 19, 2017: Evaluation Panel 3 - Asian, Southeast Asian and NHOPI and Filipino</p>	
Award Recommendation Letters Issued	Wednesday January 3, 2018	
Board Agenda Date	April 2018	
Contract Start Date	July 1, 2018	

- Section II. G. Evaluation Criteria/ Selection Committee on page 26: Language changed
As a result of this RFP, the County intends to award up to ten **twelve** contracts to responsible Bidders whose response conforms to the RFP and whose proposal presents the greatest value to the County, all evaluation criteria considered.

~~BHCS will hold three separate CSC/ Evaluation Panels. Evaluation Panel 1 will evaluate the following priority populations: African and Native American priority population bids. Evaluation Panel 2 will evaluate bids for the following priority populations: Afghan, Middle Eastern and Arabic and South Asian. Evaluation Panel 3 will evaluate the following priority populations: Asian, Native Hawaiian and other Pacific Islanders and Filipino and Southeast Asian. All bids for each priority population will be evaluated separately.~~

BHCS will hold three separate CSC/ Evaluation Panels. All bids for each priority population will be evaluated separately in the following order listed below:

Evaluation Panel 1: African, Native American and NHPI priority population bids.

Evaluation Panel 2: South Asian, Middle Eastern and Arab, Afghan (North County), and Afghan (South County).

Evaluation Panel 3: Southeast Asian, Asian (North County), Asian (South County), and Filipino.

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Bidders may only receive a contract to serve one priority population. If a Bidder scores the highest in more than one priority population that they have applied for, they will receive a contract award for the priority population with the highest allocation.

For the Afghan population: Bidders can submit separate bids for the North and South County regions. Contracts will be awarded to the highest-ranking Bidder in each County region. It is possible that one agency may be the highest ranking Bidder in each region and thus receive the contract awards for both regions.

For the Asian population: Bidders can submit separate bids for the North and South County regions. Contracts will be awarded to the highest-ranking Bidder in each County region. It is possible that one agency may be the highest ranking Bidder in each region and thus receive the contract awards for both regions. For the Asian population in North County, the contracts will be awarded to the two highest-ranked bids. BHCS will award two unique CBOs to serve the North County.

II. Fillable Forms

- The Fillable Forms template has been deleted and replaced with the RFP# 17-09 UELP PEI Services Fillable Forms Template REVISED to include eleven priority populations.

III. Budget

- The budget template is deleted and replaced with the RFP# 17-09 UELP PEI Services Budget Template REVISED to include UELP PEI Services program title and priority populations.

RESPONSES TO BIDDERS QUESTIONS

General Questions:

- Q1) If we can demonstrate we serve a service area specific priority population countywide can we be considered for a larger contract?
A1) No. Please refer to funding amounts included in Section I. A. Intent on page 3.
- Q2) If you apply for more than one priority population, do you need to submit two whole applications?
A2) Yes, Bidders must submit a separate application for each priority population, including the County region-when applicable, applying for.
- Q3) Will separate proposals be required for North and South or a single proposal?
A3) Yes. Bidders must submit a separate proposal for each priority population or service area specific priority population they are applying for.
- Q4) Given the following requirement, "Bidders must successfully demonstrate in their proposal how they meet the following Bidder Minimum Qualifications: Have at least five years' experience providing culturally-reflective health, counseling and case management services to children, youth, adults and families of the priority population;" Our agency was registered as a 501(c) 3 in May 2015 and our Clinical and Training Director has over 20 years' experience, are we eligible to apply?
A4) Yes. Please refer to the Bidder Minimum Qualifications on page 5 for eligibility to participate in the RFP. Agencies that can demonstrate they meet minimum qualifications through their organizational experience and/or in-house personnel capacity are welcome to submit proposals.

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Q5) Our organization was founded in 2010. We recently moved to the Bay Area and are less than two years in the Bay Area. Can we as startups apply for RFP# UELP PEI? Are there other requirements we need to qualify?

A5) See response to Q4.

Q6) Does the Bidding agency need to have a physical office when applying for a priority population in a different area (ie. Physical address South County and priority population North County)?

A6) Bidders shall include in their proposal their plan for serving clients outside of their office location.

Q7) Do we have access to RFI data referred to on page 5?

A7) BHCS reviewed the stakeholder input provided during the RFI process, as well as other data available, to inform the scope of work of this RFP. BHCS reserves the right to make a determination on how much, if any, to include in the RFP.

Q8) On page 48, there is a required reporting date of December 30, 2017 for the Annual Update. Can you please clarify what this is since it is prior to award announcement and contract start date?

A8) The dates included in Section III. B. PEI Prevention Program Fact Sheet apply to the County and current BHCS PEI contractors. The purpose of the Fact Sheet is to provide Bidders with information on data tracking requirements; the dates will change for the programs to be awarded at the conclusion of this RFP.

Q9) For the oral interviews, is it recommended to have mental health staff attend, or will questions be focused on fiscal issues, managing program and data/ evaluation?

A9) The Evaluation Panel will develop interview questions, as needed. Upon notification, BHCS recommends agencies include fiscal and program staff, as well as agency or program leadership and staff involved in proposal writing or development to participate in the oral interviews.

Q10) What is an Award Recommendation Letter?

A10) The Award Recommendation Letter is the Notice of Intent to Award. Per RFP page 37, the Notice of Intent to Award shall provide the name of the Bidder being recommended for contract award and the names of all other Bidders that submitted proposals.

Q11) Will the addendum include the sign in sheets from both Bidders Conferences?

A11) Yes.

Priority Population Specific

Q12) Please clarify, when you say that “bidders need to be prepared to serve recent immigrants and refugees along with the priority population on page 7. Does this apply only if these recent immigrants and refugees fall in the broad priority populations for which the bidder is awarded to serve or regardless of which of the priority populations the bidders is awarded to serve and grantees need to be prepared all new arrivals.

A12) When appropriate and as needed, Bidders should be prepared to serve recent immigrants and refugees that may present in their program.

Q13) African – Is the contract awarded to North or South as one contract or one award to South one award to North or County wide?

A13) BHCS will award one contract to a single Contractor to provide services in the North and South County. Please reference the footnote on page 3 for additional information on County specific areas.

Q14) In which priority population do the Hmong belong?

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A14) Hmong are included in South East Asia priority population.

Q15) For South Asians, Hmong is considered part of their group, why? Should be in Southeast Asian group?

A15) Please see response to Q14.

Q16) Related to the chart on page 3 of the RFP, can you provide a breakdown of population numbers and percentages related total population? Also related to these statistics, can the results of the RFI meeting be correlated to explain priorities in funding?

A16) Population data for Alameda County can be found here:

<https://www.census.gov/quickfacts/fact/table/alamedacountycalifornia/PST045216>

This census data, as well as information from the RFI data templates and current UELP utilization data was used to look at population, service gaps & needs as well as other factors such as trauma exposure, limited English proficiency (LEP), how long communities have been in Alameda County, i.e. new/emerging or relatively well established, etc.

Populations were chosen by geographic regions so that similar cultural and linguistic groups could be linked together. For the "Asian" populations chosen for this category BHCS has identified these populations based on the geographic region of the world considered Asia with the main priority populations coming from the countries of China, Japan, Taiwan, Korea, and Mongolia. Nepal and Bhutan border both Asia and South Asia, so individuals from these countries can be considered a priority population in either the Asian or South Asian priority populations.

Census and RFI data show that there's a significant Chinese population in the City of Fremont (which is the County's 2nd largest city) with 39,125 individuals which represent 17.4% of the City's total population. It's also important to note that the City of Alameda in North County has 11.2% Chinese-speaking households. Additional data highlight that Chinese is the second highest language among percentage of households in Alameda County where language other than English is spoken (Spanish 16.8, Chinese 8.3%). RFI data shows that of the Chinese community in the Southern region of the County speak Mandarin, while the population in the Northern part of the County speak Cantonese.

US Census data show that Koreans are the sixth largest Asian population in the San Francisco Bay Area, with nearly 90,000 people with approximately 19,000 Koreans living in Alameda County. Census 2010 estimates suggest that Koreans alone or in combination comprise 1% (6,877) of population in the largest cities in North County (Alameda, Berkeley and Oakland) and nearly 2% (4,443) in South County cities of Fremont and Union City. There are also approximately 13,000 Japanese individuals living in Alameda County.

Based on the RFI data as well as a more focused look at the size of the Asian population in Alameda County, in particular the population of the Chinese and Korean communities, BHCS decided to add a third Asian contract to this RFP. These are the geographic regions to be served by the three Asian contracts:

Up to 3 contracts will be awarded: 2 for North and 1 for South at \$290,000 each.

- **Each region will be evaluated separately.**
- **Bidders can apply for up to 1 North contract and 1 South contract specifically describing the community to be served in each area.**
- **If a Bidder receives the highest number of points in their North proposal and their South proposal they can be awarded these 2 contract areas. Since all of the bids will be scored separately, each bid proposal needs to be an independent proposal and stand on their own.**
- **Please be aware a bidder cannot apply for both North County contracts.**

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- **BHCS will award two unique CBOs to serve the Asian population in the Northern Region of Alameda County.**

Q17) Under Asian population, can you clarify what it means as two contracts? If you bid for two contracts, are they two separate contracts with specific service area and population specified?

A17) Yes. Please see detailed response to Q17 above.

Q18) Do both of the contracts for Asian have to both serve Countywide? Can a contractor serve a portion of the Asian population or a portion of the County?

A18) Please reference response to Q17 above.

Q19) Page 3 paragraph 3, under A. Intent says “BHCS will use this Request for Proposal (RFP) to establish ten contract to provide UELP PEI services. Bidders may only apply to serve one priority population”. Does this preclude an agency from submitting two applications, e.g. one for Asian Priority Population and one for Southeast Asian Priority Population, if the agency has deep knowledge and experience with all of the relevant population groups?

A19) Per the updates in the Addendum, Bidders may submit bids to serve up to two priority populations but will only be awarded one contract except for the Afghan and Asian populations. Please refer to . However, if one Bidder scores highest to serve Asians in North and South County, the Bidder may be recommended for award of both contracts.

Q20) How will you prioritize Native Hawaiian and Pacific Islander because Filipino have been served under Asian?

A20) BHCS has decided to split out Native Hawaiian and Pacific Islander (NHPI) from the Filipino population. There will now be a separate contract for the NHPI community for \$290,000 to focus on the North and South part of the county and a separate contract for the Filipino community for \$290,000 focused on Central and South County. The rationale for this decision is included in the paragraph below.

NHPI is relatively small but diverse population in Alameda County; they are often grouped with APIs and health inequities often go unrecognized and under addressed. NHPIs make up 1% of the population in Alameda County but 13% live in poverty. PI men have the highest all-case mortality rate in Alameda County, and 79.2% of PI pregnant women receive prenatal care in the 1st trimester (lowest in the County). Mental health access and utilization data is sparse. There is no established community organization, particularly in behavioral health services, in Alameda County that serves NHPIs.

Most of NHPI’s reside in Oakland and South County. There is interest from local NHPI specific entities to serve this population. Due to NHPI consistently being combined with other Asian populations they are underserved and undercounted, which does not contribute to decreasing overall health and mental health disparities.

Based on data from the RFI and 2010 census data the Filipino community, with 1.4+ million is the largest Asian population in the state. There are approximately 460,000 in the broader San Francisco Bay Area, and nearly 100,000 in Alameda County alone. Originally BHCS combined both of these two priority populations due to their size and the limited financial resources that BHCS can provide in this RFP. In taking a deeper look at the RFI information submitted, census data on each population and geographic location of these two populations in the county BHCS has decided to separate out the NHPI community from the Filipino community to receive services independently from one another.

Q21) There are a significant number of Mien in Alameda County. Most/many are from Laos originally but are not Laotian ethnically. Does serving this population meet the Laotian criteria in South East Asia priority population? There are more low income Mien in Alameda County than Laotians.

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A21) Bidders may propose to serve Mien as part of South East Asia priority population in addition to other communities from the Southeast region of the world.

BHCS has made its best attempt to list populations in specific geographic regions for the South Asia, Southeast Asia, and Middle East, however if there are communities/populations not specifically mentioned that Bidders would like to include in their proposal, please include this information and provide rationale.

Q22) Asian population groups are listed on page 7 as people from China, Japan, Taiwan, Korea, Mongolia. Does an applicant need to include all of these listed language groups if applying to target Asians?

A22) If not all languages capacity can be provided, Korean, Cantonese and Mandarin are recommended as the first priority. Data from the California Department of Health Care Services (DHCS) indicates that Cantonese and Mandarin are current threshold languages for Alameda County and data from the California Health Interview Survey (CHIS) show that Koreans have a high rate of limited English proficiency LEP (76%) compared to other major Asian subgroups and Latinos (Chinese 68%, Japanese 51%, Filipino 39%, South Asians 35% and Latino 72%).

Q23) There are 4 ethnic categories under "Asian." Is Asian a priority or China – Chinese or any combination of any subset a priority based on the RFP definition?

A23) Please refer to the priority populations included on page 7 of the RFP and above in the addendum.

Q24) Priority populations – is contract limited to only people from named countries or are other populations from those areas eligible – for example people from Yemen (middle East).

A24) Priority populations are location based; contracts are not limited to only people from named countries in the RFP. Please note, per Scope on page 5, at least 75 percent of UELP PEI participants served must be from the priority population.

Q25) Do you have to demonstrate how you have served all subgroups in priority population?

A25) Bidders shall demonstrate their experience working with individuals in the priority population. Bidders that may not feel they have the current capacity to serve all groups, please include information on Bidder's proposed plan to scale up to meet the needs of the communities in the geographic region applying for. Overall, BHCS would like to see as much evidence as possible of working with the various groups in the priority population. This can be done through partnerships, translated resources, technology, participation in a variety of difference events to highlight health and wellness, etc.

Q26) Suggestions:

- Add Indonesia to Southeast Asia.

BHCS has made its best attempt to list populations in specific geographic regions for the African, Asian, South Asian, Southeast Asian and Middle Eastern regions of the world, however if we have missed a community/population in one of these geographic areas that you would like to include in your proposal please include this information and provide the rationale on why you are including them.

- Karen are ethnic groups from Myanmar.

Thank you for this correction. This ethnic group as well as other ethnic groups from Myanmar can be served through the Southeast Asian contract.

- There are no Hmong in Alameda County to speak of and they are ethnic group. Add Tibet to South Asian? Many come from India.

Thank you for this correction regarding the Hmong community. If a Hmong community becomes established in Alameda County they can be served through the Asian contracts. Tibet borders both the Asian and South

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Asian region so individuals from Tibet can be considered a priority population in either the Asian or South Asian priority populations.

- Pacific Islanders are people from Polynesia, Micronesia, and Melanesia.

Thank you for this information. Individuals from these regions can be served through the NHPI contract.

- Filipinos are not Pacific Islanders. This is dangerous to insert a group to the PI families. You perpetuate inequity.

Thank you for your comment, please see the section of the addendum that describes the separation of the Filipino and NHPI contracts.

- Federal mandate, identify Pacific Islanders as Native Hawaiian and Pacific Islanders (NHPI), not NHOPI, not including Filipinos. Filipinos are Asian.

Thank you for your comments.

PEI Services

Q27) Can you please clarify the difference between psycho-education workshops and educational workshops? Can you please clarify the expected audience for the respective workshops?

A27) Psycho education and education workshops are the same. Bidders shall propose the audience for education workshops.

Q28) What are examples of evidence based practices to deliver trainings of mental health? (reference page 9).

A28) Per page 9, the awarded Contractor will develop curriculum or use evidence based practices or community defined models to deliver trainings on mental health including indicators of community defined models to deliver trainings on mental health indicators. Evidence based practices may include Mental Health First Aid and Promotora or community health worker models.

Q29) Can you clarify what “mental health referrals” means? Specific examples?

A29) Mental Health Referrals includes referrals to treatment within County Specialty Mental Health Services or Medi-Cal funded services.

Q30) Is it possible to have mental health referrals within our agency (as well as County for crises)? We have in-house capacity for addressing psychiatric needs as well as crises.

A30) Yes, if a Bidder a County Mental Health Contractor.

Q31) Regarding the mental health referrals: If we receive this grant, does that make us a County provider? If not, are we still able to make in-house referrals? We have a psychiatrist who serves our clients and we provide crisis management (which then can involve referrals to County services as needed)

A31) You can provide referrals to any type of service the client needs resources for. However, the referrals that BHCS are required to track are mental health treatment referrals for specialty mental health or mental health treatment services targeted to the Medi-cal recipient population such as Beacon or Kaiser. If you're an agency that has a specialty mental health contract to provide treatment services to individuals who have a moderate to severe mental illness or a contract to provide mental health treatment services to individuals with a mild to moderate mental illness than you can count your in-house referrals as part of your referral numbers. Please be advised that the referral numbers in the RFP are a minimum amount of referrals .

Q32) Under “Preventative Counseling” activities, it is stated that clients “may also receive Prevention Visits.” Are these a required component of the program? Are home visits a required component of the program? Or does this depend on the nature of the program itself?

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- A32) Per page 9, Prevention Visits may be offered. Prevention Visits are not required but allow for flexibility in the model and are encouraged. Home visits depend on the nature of the program and culture.**
- Q33) What form of data analysis will be required?
- A33) BHCS will do PEI program data analysis. Awarded Contractors are required to collect data and coordinate data entry and reporting.**
- Q34) 51% of the funds will be directed to children or youth ages 0 to 24 and their families -Does this apply to each applicant? Or is this the County's overall goal collective of all agencies outcomes?
- A34) This applies to each applicant.**
- Q35) Should 25% be within the same priority group or do you allow 25% from other group, i.e. Asian priority and Southeast Asian?
- A35) Per Scope on page 5, at least 75 percent of UELP PEI participants served must be from the priority population. The remaining 25 percent may be from other populations.**
- Q36) For the requirement that "at least 66 percent of clients who receive referrals will successfully link with services referred to," is this referring to the minimum of 6 mental health referrals annually? Or something else?
- A36) Yes, at least 66 percent of clients referred should successfully link to services referred to. For example, at least six clients will be referred for services and of those six, at least four will successfully link to services.**

PEI Program Staffing

- Q37) For the staff positions, is there a required salary range, or can we choose salary based upon organizational salaries and staff/candidate prior experience?
- A37) Bidders shall determine salary range but should meet minimum wages. Bidders shall justify staff salaries in their budget justification and cannot exceed budget maximum amounts.**
- Q38) As we develop a staffing plan for this specific RFP, are all FTE covered under the PEI grant intended to be new staff? Or, can staff covered under the PEI grant be a combination of current and new staff?
- A38) Yes, PEI staff can be a combination of current and new staff. Bidders shall demonstrate distribution of cost in their budget.**
- Q39) Do we need to already have an identified candidate for the staff to be hired?
- A39) No.**
- Q40) If the Mental Health provider is not from the target population, can a translator be used? Or does the mental health provider need to speak the language?
- A40) Yes, translation and interpretation services can be used as needed.**
- Q41) To clarify, is the Mental Health Specialist required to be a member of the primary cultural group which the program will serve? So if the cultural group is Middle Eastern, the Mental Health Specialist must be from a Middle Eastern country? Or, can they have the language and cultural training even if they are not a member of that primary group?
- A41) The Mental Health Specialist may be a member of the primary cultural group if appropriate or available. The Mental Health Specialist should have the language and cultural training, when available and if appropriate.**
- Q42) Are Outreach Workers required to be from the primary cultural group population?

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A42) Yes, Outreach Workers should be from the primary cultural group population.

Q43) Previously, Outreach Workers provided Preventive Counseling (early intervention services). Now are you saying only Mental Health Specialist provide Preventive Counseling?

A43) No. Bidders shall propose their model for delivering services in their proposal.

Q44) Please clarify the required qualifications for the Mental Health Specialist.

A44) Please refer to Planned Staffing and Organizational Infrastructure on pages 10-11. The Mental Health Specialist may be an LPHA, unlicensed LPHA, or a graduate trainee/ student. If the Mental Health Specialist is a graduate trainee/student, Bidders shall allocate LPHA FTE to co-sign for counseling services and provide clinical oversight.

Q45) Is there an expectation on which population should provide mental health consultation?

A45) No. Bidders should describe their plan to conduct mental health consultation services, including which populations (community leaders, teachers, faith leaders, parents, etc.) or groups based on the needs in those communities.

Q46) The staffing description includes what services are expected to be provided. Is there a criteria of which position provides mental health consultation? Can a person in the Outreach worker and Mental Health Specialist position provide consultation services?

A46) The Outreach Worker and Mental Health Specialist can provide Mental Health Consultations as long as staff are properly trained.

Q47) You mentioned outreach workers to be supervised by Mental Health Specialist. How rigid is this standard? For example, can outreach workers be supervised by Program Manager?

A47) Bidders can propose their structure for supervision. The Program Manager can supervise the Outreach Workers. The Mental Health Specialist can provide clinical supervision and support.

Q48) Can you please clarify the role of the "Program Manager"?

A48) The Program Manager role oversees the program and makes sure the program is done to fidelity. Bidder shall propose the role of the Program Manager in their proposal.

Q49) Outreach coordinator? Does internal staff's title need to match exactly? Can it be a community health worker?

A49) Bidders may propose staff titles, however staff roles should align with the staffing model included in the RFP on pages 10-11.

Q50) Can you please clarify the role of the "Data Clerk." This title sounds as if it is someone who enters data, but could it be a person who is more involved in data collection and analysis (such as a Program Evaluation staff person?)

A50) The Data Clerk/Coordinator may be a person who does data collection, data entry, and data management. Bidders can propose who will do the work of the Data Clerk/ Coordinator.

Q51) Can a Mental Health Specialist also fulfill a portion of the role Outreach Worker? For instance, it is cost-effective to have the Clinician who is assigned at a community/ school site to conduct both the outreach and prevention counseling? In this case, it may be allocated according to the following staffing model: 0.2 Outreach Worker FTE and 0.8 Mental Health Specialist FTE = 1.0 FTE.

A51) Bidders can propose that the Mental Health Specialist fulfill a portion of the Outreach Worker responsibilities. Per page 10, individual staff must be allocated at a minimum of 0.5 FTE for Outreach Workers if including multiple part time staff to provide services.

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Q52) Could the Data Clerk and the Program Manager (or Outreach Worker) be combined? ie as a whole 1.0 FTE
A52) The Data Clerk/ Coordinator and Program Manager should not be combined. The Outreach Worker and The Data Clerk/ Coordinator can be combined.

Q53) Will you consider peer mental health counselor with a mental health certificate?
A53) Not as a Mental Health Specialist.

Q54) Asian is listed as County wide on page 3 but on page 10 Planned Staffing, Asian is not listed under County wide. Please clarify why is that and which planned staffing model should be used for Asian.

A54) BHCS will be contracting with up to two agencies to provide services to the priority populations for the Asian and Afghan populations. Staffing models for these areas are based on Service-Area specific programs due to funding amounts.

Service Partnerships and Collaborations

Q55) May provider subcontract any part of services or component for certain ethnic populations included in each defined population?

A55) Yes, Bidders may partner with other agencies to provide services or component/s for certain ethnic populations. The County will contract with the awarded Contractor to provide services. The awarded Contractor will be responsible to the County for all contract deliverables.

Q56) Can an organization bid as a prime bidder and be included as a sub on another contractor's bid?

A56) Yes, bidders may partner with other agencies and share resources to provide services to the Priority Population. However, BHCS will only contract with one organization to serve priority populations except for the Afghan and Asian populations.

Q57) Can one Contractor be awarded more than one contract for the same priority population? E.g. Afghan or Asian.

A57) Please refer to the Clarifications and Changes on page 1 of this Addendum.

Q58) If so, specifically for Afghan population, can one contractor provide services for both North and South from a single service location or will one location in each region be required?

A58) See response to Q58 above.

Q59) Would a joint proposal from 2 organizations to cover the whole county (instead of separate North/ South proposals for the Afghan priority population) be considered?

A59) See response to Q58 above.

Q60) Can you partner with non 501(c)3's, e.g. a church a community organization? Do partners have to be SLEB?

A60) Yes, Bidders can partner with non 501(c)3s and non-SLEB certified organizations. However in order to receive SLEB preference points, Bidders should be SLEB certified at the time proposal is submitted.

Q61) Partnership – Is your expectation to demonstrate how an applicant collaborates with the entities mentioned in Section I. F. 4 on pages 11-12.

A61) Bidders can collaborate with other PEI efforts and/or other agencies to provide services to the priority population. BHCS is interested in seeing how bidders collaborate with agencies and/ or service providers across the County.

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- Q62) Where can we obtain a list of the County's other PEI efforts so that we can identify appropriate collaborative partners?
- A62) BHCS' most recent MHSA Plan Update can be located at <http://acmhsa.org/> Click on documents and then approved plans to see the most recent plan (FY 16/17), PEI programs are listed on page 11 and a more detailed version of each program starts on page 50.**

Program Budget

- Q63) Is there a limit or cap on administrative costs?
- A63) There is no cap or limit on administrative costs but it should be reasonable. Bidders shall justify the administrative rate included in their budget.**
- Q64) Is there a revenue/ match requirement or a recommended amount to raise in match to strengthen bid?
- A64) No. There is no revenue or match requirement.**
- Q65) If staff are shared salaried on multiple contracts, do we have to report that contract and budget under revenue section of the budget?
- A65) No. Bidders should only include the FTE staff allocated to the program in the budget and provide justification in their budget on how they will separate costs.**
- Q66) MAA Billing Certification – Can funds be used for MAA certification training? Does the County coordinate the MAA Billing Certification?
- A66) Funds do not need to be allocated to MAA certification training. The County will provide MAA trainings and technical assistance at no additional cost to awarded Contractors.**
- Q67) Any requirements for Bidder's internal control and finance ability, such as audit reports, etc?
- A67) Bidders are not required to submit audits as part of the proposal. Once awarded, the successful Contractors are subject to Alameda County Contractor Policies and Procedures.**

SLEB and Local Preference Points

- Q68) Do we have to be SLEB certified or can we be in the process of obtaining certification?
- A68) Bidders must be SLEB certified by the submission date to be eligible to receive Bidder preference points.**
- Q69) Do SLEB-exempt orgs receive the 5% preference points because they are local?
- A69) Bidders local to Alameda County are eligible to receive five percent preference points with submission of appropriate documentation. Please refer to page 6 of the Fillable Forms for additional information.**
- Q70) Pls travel across county lines and we have been offering services for 15 years in San Mateo, can we be considered a local entity?
- A70) No, a local entity refers to an Alameda County firm or dealer with fixed offices and having a street address within the County for at least six (6) months prior to the issue date of any RFP being responded to; and which holds a valid business license issued by the County or a city within the County..**

Bid Submission

- Q71) Can tables and charts (attachments 1A and 2A) have different font size from the narrative?
- A71) Yes.**

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Q72) When collaborating with another agency do we need to provide a MOU with the proposal?

A72) No, per the RFP, Section II. F Response Format/ Proposal Responses on page 19, any unrequested material submitted with the bid will be removed. Bidders shall propose their plan for collaboration in their proposal.

Q73) Can proposal be hand delivered?

A73) Yes, the proposal can be hand delivered by the proposal due date.

Q74) Is a binder clip ok for the 7 copies? RFP says unbound, so wanted to clarify.

A74) Yes, please refer to Section II. E. Submittal of Proposals/ Bids on pages 16 through 19.

Q75) Does Section 5a and 5b of proposal only go in the original, and should not be included in 7 copies or USB pdf scan?

A75) Yes, sections 5a and 5b do not need to be included in the 7 copies. However, the USB should include an electronic copy of the original RFP.

Q76) Confirm that USB copy should include both a full PDF scan and the excel file with a budget template.

A76) Yes. The USB should include an electronic copy of the original proposal and the budget template saved as an Excel file.

Bidder References

Q77) Can references be non-County funders (private foundation funders)?

A77) Yes. Per page 20 of the RFP, references should have worked with Bidder on similar scope, volume and requirements of those outlined in this RFP.

Q78) Who qualifies as former reference?

A78) Former references may include any previous funders or contractors. Please provide rationale if Bidder does not have three former references.

Q79) We have served the South Asian population under contract with Alameda County since 2010. No prior program of this type existed. So how do we define "former" reference?

A79) Please see previous response to Q79.

Q80) Can references be organizations that have worked with Bidder on similar scope of work that are not contracted with the County?

A80) Yes.

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BIDDERS CONFERENCES

The following participants attended the Bidders Conferences:

Company Name / Address	Representative	Contact Information
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		Subcontractor: N/A
		Certified SLEB: N/A
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Alameda County BHCS 1900 Embarcadero Cove, Suite 205 Oakland, CA 94606	Belinda Davis	Phone: (510) 383-2875
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		Subcontractor: N/A
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Company Name / Address	Representative	Contact Information
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		Certified SLEB: N/A
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		Subcontractor:
		Certified SLEB:
Mental Health Association	Steve Bischoff	Phone: (510) 835-5020
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		Prime Contractor:
		Subcontractor:
		Certified SLEB:
STARS 545 Estudillo Ave. San Leandro, CA 94577	Jeanie Lynch	Phone: (510) 352-9200 x211
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International Rescue Committee 440 Grand Ave., #500 Oakland, CA 94610	Kate Landberg	Phone: (925) 487-1724
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		Subcontractor:

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		Subcontractor: --
CERI 544 International Blvd. Oakland, CA 94602	Mona Afary	Certified SLEB: Yes
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Partnership for Trauma Recovery 1936 University Ave. Berkeley, CA	Gianina Pellegrini Monika Parikh	Phone: (510) 295-4924
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		Certified SLEB: Yes
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Afghan Psychological Association	Russell Daniels	Phone: (510) 445-1015
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		Certified SLEB:
Filipino Advocates for Justice 310 8 th St., #309 Oakland, CA 94607	Lillian Galedo	Phone: (510) 465-9876
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Catholic Charities of the East Bay 433 Jefferson St. Oakland, CA 94607	Kathleen Johnson	Phone: (510) 768-3100
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		Certified SLEB: Yes
Asian Health Services 310 8 th St., Ste. 200A	Luella Penserga	Phone: (510) 917-0836
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Company Name / Address	Representative	Contact Information
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		Subcontractor:
		Certified SLEB:
East Bay Refugee Forum www.eastbayrefugeeforum.org	Sean Kirkpatrick	Phone: (510) 282-7550
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		Certified SLEB: Yes?
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CHAA 1141 Harbor Bay Parkway Alameda, CA 945602	John Chang	E-Mail:
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Afghan Mental Health Project	Gail Steele	Phone:
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		Certified SLEB: