RFP No.RW0919MAI

Substance Abuse & Non-medical Case Management

Q&A

Questions and Answers

1. What are the components of the substance abuse service category?

Answer: Please refer to page 7-9 which defines the expectations/requirements for this service category.

1. How much ARIES training is provided?

Answer: As much as you need. Matt Wong, provides training to agencies as well as “refresher” training to staff and program mangers support agencies with ARIES training.

1. Since we are bidding for both substance abuse and non-medical case management, would we submit a total of 12 packets? ( 2 original, 5 copies per program)?

Answer: Yes, you must BID for both (you will submit two separate proposals). You must have two separate budgets that match the award amount that is on page 14. You should have one budget and one budget narrative per program.

 You may use the same letters of support and references.

1. What is the explanation for submitting a proposal per program?

Answer: There are two separate programs and Planning Council allocates two separate budgets for each program. They are bundled due to the budget’s low amount per program and we believe it would be one person that provided the service.

1. Could another body outside of the Planning Council create a user-friendly bidding process that requires one application?

Answer: We will take that into consideration for the next application period.

1. Where are the funding allocations and information regarding the maximum amount bidder’s may apply for located?

Answer: Page 14

1. Where is the information regarding use of technology and health equity as an additional program requirement located?

Answer: It is located under policy and procedures requirement and client access requirement. Pages 10-12.

(Examples of use of technology include: Using Facetime for counseling sessions text messages for scheduling and following up purposes with clients, virtual support group, etc)

1. Can an agency propose to serve just Transgender Women?

Answer: Agencies can provide services to either one or both of the priority populations.