**COUNTY OF ALAMEDA**

**HEALTH CARE SERVICES AGENCY (HCSA)**

QUESTIONS & ANSWERS

**to  
RFP No. HCSA-901123**

**for**

**Recipe4Health Health Coaching/Nutrition Education Service Provider**

**Summary of Q&A Submitted**

**Networking/Bidders Conferences held on February 28 and March 1, 2023**

**Notice to Bidders**

This County of Alameda, HCSA Questions & Answers (Q&A) Document has been electronically issued to potential bidders via e-mail based on the bidders conference sign-in sheets or from other sources. This Q&A Document will also be posted on the General Services Agency (GSA) Contracting Opportunities website located at <https://www.acgov.org/gsa_app/gsa/purchasing/bid_content/contractopportunities.jsp>

**Bid/Contract Questions**

**Q1: Are bidders required to be SLEB Certified or subcontract with a SLEB in order to submit a bid?** **Could you please confirm whether SLEB participation is a requirement or a preference for this RFP?**

*A1: Bidders must meet the County’s Small and Emerging Locally Owned Business (SLEB) requirements in order to be considered for the contract award; Bidders must be certified SLEBs, or subcontract with a SLEB for at least 20% of the total estimated bid amount in order to be eligible for contract award, or be SLEB exempt. As per the* [***Alameda County SLEB Program Overview***](http://acgov.org/auditor/sleb/overview.htm) *[*[*http://acgov.org/auditor/sleb/overview.htm*](http://acgov.org/auditor/sleb/overview.htm)*], which is linked to in the RFP SLEB INFORMATION SHEET, the following entities are exempt from the Small and Emerging Local Business (SLEB) requirements as described above and are not required to subcontract with a SLEB:*

* *non-profit community-based organizations (CBO) that are providing services on behalf of the County directly to County clients/residents;*
* *non-profit churches or non-profit religious organizations (NPO);*
* *public schools; and universities; and*
* *government agencies.*

*Please refer to RFP Section II.O.2.b. AWARD, Small Local Emerging Business (SLEB) Program (p.25); Exhibit A – BID RESPONSE PACKET (p. 9), SMALL LOCAL EMERGING BUSINESS (SLEB) INFORMATION; and Exhibit A – BID RESPONSE PACKET (p. 10), SLEB INFORMATION SHEET for more information.*

*Furthermore, as per Exhibit A – BID RESPONSE PACKET Instructions, if Bidders are making any clarifications and/or amendments; or taking exception to policies or specifications of this RFP, including those to the COUNTY SLEB POLICY, these must be submitted in the Exceptions, Clarifications, Amendments Section of this EXHIBIT A – BID RESPONSE PACKET in order for the bid response to be considered complete. As per Exhibit A – BID RESPONSE PACKET, EXCEPTIONS AND CLARIFICATIONS (p. 13), the County is under no obligation to accept any exceptions, and such exceptions may be a basis for bid disqualification.*

**Q2:Our official address of record is in San Francisco, but all of our business is conducted in Alameda County. We meet the Small and Emerging requirements, is there any way to meet local requirements based on business conducted or proximity to Alameda County?**

*A2: As explained in detail in* [***Alameda County SLEB Program Overview***](http://acgov.org/auditor/sleb/overview.htm) *[*[*http://acgov.org/auditor/sleb/overview.htm*](http://acgov.org/auditor/sleb/overview.htm)*], which is linked to in the RFP SLEB INFORMATION SHEET:*

1. *An Alameda County supplier is a 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/Q being responded to; and which holds a valid business license issued by the County or a city within the County.*
2. *Alameda County products are those which are grown, mined, fabricated, manufactured, processed or produced within the County.*
3. *Locality must be maintained for the term of the contract. Evidence of locality shall be provided immediately upon request and at any time during the term of any contract that may be awarded to Contractor.*
4. *A small business will be considered for SLEB certification upon meeting the local business requirement.*

**Q3: The RFP states all submitted proposals will be made available before “recommendation to award”. Is this before the protest period or after?**

*A3: The Bid Protest/Appeals process is provided in the event that Bidders wish to protest the bid process or appeal the recommendation to award a contract* ***once the Notices of Intent to Award/Non-Award have been issued****. Bid protests submitted prior to issuance of the Notices of Intent to Award/Non-Award will not be accepted by the County.*

*The submitted proposals will be made available upon request no later than five calendar days before approval of the award and contract is scheduled to be considered by the Board of Supervisors. Should a bid protest be received according to the submission requirements outlined in RFP Section II.L.1. BID PROTEST/APPEALS PROCESS (pp.21-24), the decision on the bid protest must be final prior to the Board hearing or HCSA award date.*

**Q4: The RFP mentions that several alternatives may be submitted in one bid response. Does this include alternative budget proposals? Would we submit multiple budget forms?**

*A4: Please refer to Addendum No. 1, which has removed the language “however, several alternatives may be included in one response” in* *Section III.T.3.b. of the RFP, SUBMITTAL OF PROPOSALS. Only one budget form is to be submitted per a bid response.*

**Q5: Are we able to submit on a different day before March 20?**

*A5: Yes. As stated in RFP Section III.T.1. SUBMITTAL OF PROPOSALS, Document Submittal (p.29), all bids must be SEALED and RECEIVED at the Health Care Services Agency of Alameda County by 2:00 p.m. on the due date specified in the Calendar of Events. The County* ***strongly recommends early submittal****; UNSEALED OR LATE BIDS CANNOT BE ACCEPTED.*

**Q6: Should the electronic copy of the bid packet have signatures as well?**

*A6: Yes. As per RFP Section III.T.2. SUBMITTAL OF PROPOSALS, Bid Response Preparation (p.30), Bidders are to submit one (1) original hardcopy bid, with original ink signatures and Bidders must also submit an electronic copy of their quotation. The electronic copy must be in a single file (PDF with OCR preferred) and shall be an* ***exact*** *scanned image of the original hard copy Exhibit A – Bid Response Packet, including additional required documentation. The file must be on disk or USB flash drive and enclosed with the sealed original hardcopy of the bid.*

**Q7: Can you clarify the statement in the RFP: “Price Discrepancy. In the case of a discrepancy between the unit price and an extension, the unit price will be used for evaluation purposes.”?**

*A7: Please refer to Addendum No. 1, which has edited this language in RFP Section II.I.4. COUNTY PROCEDURES, TERMS, AND CONDITIONS, Evaluation Criteria / Selection Committee to read “Price Discrepancy. In the case of a discrepancy between the budget form and budget narrative, the budget form will be used for evaluation purposes.”*

**Scope of Work Questions**

**Q8: What is the intention for coaching groups / clinic-based GMV's that are feeding into R4H but are currently contracted separately from R4H? Will those be wrapped into this contract or continue to be separately negotiated/contracted?**

*A8: As stated in RFP Section I.A., INTENT (p. 4), “Bidders must have the ability and capacity to implement and operate a minimum of eight health coaching/nutrition education groups (some remote and some in-person)”. Recipe4Health currently has eight (8) health coaching/nutrition education groups operational, regardless of if they are contracted separately from R4H. Contract negotiations between the awarded bidder, Recipe4Health, and any potential external parties occur in a separate process after a bidder is selected for award.*

**Q9: Follow up to my first question: If some coaching groups/GMV's will remain contracted separately/directly with clinics, please clarify/reconfirm the # of sites requested (ie, is it still 8 groups with R4H?)**

*A9: See answer A8. Yes, Bidders are required to serve 8 groups.*

**Q10: The RFP mentions 150 as a minimum number of individual coaching sessions to be provided in a 6-month period. What is the intended plan if demand for individual coaching far exceeds this number?**

*A10: Please refer to Addendum No. 1, which edits the minimum number of individual coaching/nutrition education patients for the 6-month contract period the awarded Bidder will be required to serve from 150 to 275. R4H’s goal is to grow enrollment in health coaching/nutrition education services. If demand for individual coaching far exceeds the minimum number included in this RFP, the maximum number of patients that can be accommodated should receive services. If Bidder has capacity to serve more than the minimum number of clients, please provide additional details in the budget narrative. R4H may execute additional contract(s) to provide services for patients, as needed.*

**Q11: The clinics mentioned, you would have to choose one to be able to work or work in all the clinics that are on the list?**

*A11: Contractor would be required to provide services at all participating clinic locations identified by Recipe4Health (R4H).*

*As stated in RFP Section I.A., STATEMENT OF WORK, Intent (p. 4), “Bidders must have the ability and capacity to implement and operate a minimum of eight health coaching/nutrition education groups (some remote and some in-person)”.*

*Furthermore, as stated in RFP Section I.B. STATEMENT OF WORK, Background (p.5): Recipe4Health currently operates in five clinic sites across Alameda County: 1) Native American Health Center; 2) Lifelong Medical Center – Ashby; 3) Bay Area Community Health – Liberty; 4) Hayward Wellness Center; and 5) Tiburcio Vasquez Health Center; with expansion plans to add clinic locations in 2023 (based upon sufficient funding available for program expansion).*

*And as stated in RFP Section I.C.9. STATEMENT OF WORK, Scope (p.9): Contractor shall have the capacity to start a new health coaching/nutrition education group when given a minimum of 2 months lead time by Recipe4Health. The timing of the build for each additional health coaching/nutrition education group will be based on possessing sufficient funding sources.*

**Q12: What is the estimated number of incoming referrals (patients) that the team will need to conduct outreach to per month or year in 2023?**

*A12: Several factors can influence referral numbers, however, a rough estimate of incoming referrals for all 8 active clinics is 250 per month, with an average range of 32-75 per individual clinic.*

**Q13: For required trainings, what type of time commitment do you anticipate this will be for any 6 month period? Will this be required of all health coaches on staff? All senior leaders?**

*A13: If training is requested, at minimum, a time commitment of 6 hours would be required in a 6-month period. If this occurs, Recipe4Health would provide as much notice as possible, to allow contractor to build in time for staff to be trained. Trainings would be required for all health coaches who work directly with patients.*

**Q14: For this RFP, how are you defining unduplicated participants? To confirm: is this someone who has never had a prior referral in their life? Or is there a time frame associated with re-referrals? Or what if a participant had one individual coaching session but later decided to enroll in group coaching?**

*A14: Unduplicated participants are defined as participants who are participating for the first time and have not received prior services in the program. Re-referrals or participants who have received one individual coaching session but later enroll in group coaching are not considered an unduplicated patient as they have received prior services in the program.*

**Q15: As we continue to innovate / evolve the services together, what is the capacity to change/renegotiate prices and pricing structures in future iterations/renewals of this contract?**

*A15: Contract negotiations begin after the Notices of Intent to Award/Non-Award are issued. Pricing structures may be negotiated during this time. Pricing structures may also be re-negotiated at the time of contract renewal, should the County renew the contract after the initial 6 month period.*

**Q16: What are the outcomes data that you (and your funders) are expecting from nutrition education / health coaching services? Is any part of the contract predicated on reaching specific outcome goals? What outcomes enable this program to scale?**

*A16: Outcome data includes: 1) 100% of referred patients are offered health coaching; 2) 50% of participants who receive medically supportive food, will receive at least one sessions of health coaching/nutrition education; 3) meeting or exceeding 10-12 participants per group average attendance rates.*

*Contract negotiations may include reaching specific outcome goals. Meeting or exceeding the above outcome goals, as well as sufficient funding and clinic availability, enable this program to scale.*

**Q17: The person needs to have the health coach certificate, or they can be a community promoter certificate?**

*A17: A specific health coaching certification is not required. Bidders should use their discretion when listing certificates that may strengthen their proposed bid to meet the RFP scope of work or specifications.*

**Q18: The specified number says 8 but the contractor can increase the number if there are more than 8 people?**

*A18: A total of 8 health coaching groups are currently active (2 in-person, 6 virtual) in the R4H program. R4H could decide to add additional groups, depending on funding and availability of clinics. The awarded Bidder needs to be able to accommodate an added group with a minimum of 2 months lead time (see RFP Section I.C.9. STATEMENT OF WORK, Scope (p.9).*

**Q19: It can be considered if you are taking the training and have not finished health couch?**

*A19: See A 17 above.*

**Budget Questions**

**Q20: It looks like the budget form specifies minimum service levels.  Should the bid pricing submitted be matched to those minimums?  How might the ability to scale up / serve more than 10 patients per group to be reflected in the budget form if at all?**

*A20: Yes, bid pricing should match stated minimums. Please refer to Addendum No. 1, edited RFP Exhibit A – Bid Response Packet, BUDGET FORM (p.19).*

*As stated in RFP Exhibit A - Bid Response Packet, BUDGET FORM (p.19), Instructions:**Bidder must use the Budget Form provided below. The proposed budget should state costs, including personnel, supplies and materials, administrative, indirect costs, etc. to provide the proposed services for 8 health coaching/nutrition education groups (4 virtual Clinic-based GMVs at minimum of 10 patients per group, 2 in-person Clinic-based GMVs at minimum of 10 patients per group, and 2 County-wide groups at minimum of 10 patients per group) and 275 individual coaching/nutrition education patients for the 6-month contract period.*

*If Bidder has capacity to serve more than the minimum number of clients, please provide additional details in the budget narrative.*

**Q21:** **How should referral intake / outreach services to be reflected in the budget form?**

*A21: Please refer to Addendum No. 1, edited RFP Exhibit A – Bid Response Packet, BUDGET FORM (p.19) where additional budget lines have been added specifically for referral intake/outreach services.*