

**RFP #60-770-15-05171, Behavioral Health Services for Women Inmates  
Offeror Questions**

1. Please provide as much clarification as possible on the number of personnel by job category to be provided by the Contractor for EACH of the two prisons, including managerial and clerical staff.

*According to the contract amendment a minimum of 20 staff will be utilized at each place. At each facility there is a state employed Behavioral Health Therapist Supervisor who will manage all staff and a state employed Clerk. The contractor may hire additional manager at each site for their own staff oversight. At a minimum, 2 additional clerks will be needed for WNMCF and possibly one additional clerk for SCC.*

2. The pricing form in Appendix H includes spaces to provide a "Price" for each "Option Year." Are vendors supposed to put a total contract price for the year or a per-inmate-per-diem rate on the pricing form?

*Per-Diem rate*

3. If a per-inmate-per-diem rate is to be included in the price proposal, what inmate census figure should vendors use to calculate the per-diem rate?

*A minimum of 700 inmates*

4. What will be the census at each of the two prisons?

*WNMCF 450 and at SCC 300 to start*

5. What will be the start date of the contract?

*The contract becomes effective when it is signed by the NM Department of Finance and Administration, Contracts Review Bureau.*

6. Please describe the Department's plan for transferring females to the two prisons. When will this occur and will it be an all-at-once transfer or gradual over a period of time?

*The 1st Quarter of 2016; this will be over a 4 day period.*

7. What will happen to the state-employed mental health program staff currently working at Western and Springer? Will the Contractor be expected to offer employment to state personnel affected by this procurement?

*The existing NMCD behavioral health staff and their positions will remain at Western and Springer. This includes a Behavioral Health Therapist Supervisor, Behavioral Health Therapist(s) and Substance Abuse Provider(s) at each facility. The overall Behavioral Health program at each facility will be under an NMCD Behavioral Health Therapist Supervisor. The existing staff will remain state employees.*

8. Section B.2, on page 24 of the RFP indicates "Offerors must have the ability to secure a Performance Surety Bond..." Will a Performance Bond be required? If so, at what amount? And, should vendors factor the cost of the Performance Bond in their proposal, or will the Performance Bond be negotiated during contract negotiations?

*In your response you must demonstrate that you are able to secure a performance bond. It is not necessary to include an actual bond with your response.*

9. Section IV.B.2. Organizational References – Page 23 indicates the references are to be submitted on or before Wednesday December 30, 2015. Appendix D – Reference Questionnaire, page 45 indicates it is due no later than Thursday December 17, 2015. Is it acceptable to change the date on the Reference questionnaire form to December 30?

*Submission by December 30, 2015 is acceptable.*

10. Who is responsible for the cost of the RDAP supplies, to include UA cups, workbooks and journals, and other supplies necessary for the RDAP and DWI programs?

*All these supplies are furnished by the state.*

11. In reference to after-hours crisis calls, the State currently provides additional compensation to clinicians responding to crises on site. Will the contracted clinicians be provided with this compensation per crisis, or will this be reflected as additional salary?

*The contractor can provide their own schedule of compensation for after-hours crisis calls or adapt what NMCD is using. Currently, Behavioral Health Therapists receive 1/8 hour pay for each hour they are on-call and then they can receive pay or comp-time for the time they actually spend responding to a crisis. Substance abuse providers or counselors are not put into the on-call rotation.*

12. Section III.C.1 on page 18 of the RFP provides the order in which the proposal must be indexed.

- a. For the response to Item c, *Response to Contract Terms and Conditions* are vendors required to list the contract terms in Appendix C and a concurrence for each item or can vendors provide one blanket statement of concurrence?

*Either will be acceptable.*

- b. In the following item d., *Offeror's Additional Terms and Conditions*, if vendors do not have exceptions or proposed terms and conditions, are vendors still required to submit this section with the proposal?

*Please insert a brief statement that you have no exceptions to the proposed terms and conditions.*

13. On RFP page 18, Technical Proposal Binder 1 item f.3 is titled *Oral Presentation*. How should vendors index and respond to this section?

*Oral presentations will not be held for this solicitation. You may disregard.*

14. Section V.A, The Evaluation table 1, *Business Specifications* are listed as 100 points. The items within section IV.B *Business Specifications* are listed in table 1 as pass/fail items (no points assigned). If those items are pass/fail, what will the 100 points for *Business Specifications* be based on?

*You must include detailed information on your business. (Pass/fail) Points will be awarded based on the information provided in your narrative.*

15. Are vendors permitted to print the hard copy of the proposal double sided?

*This is acceptable.*

16. Appendix H – Cost Response on RFP page 51, Could the NMCD clarify and provide examples of the nature and level of detail required in completing the lines and columns of the table on Appendix H Cost Response? For example, since this is primarily a staffing services contract, should vendors list staff by position title in this table and include number of staff and cost per position?

*This is only an example of how an offer may respond. You may use a different format as long as your cost proposal clearly demonstrates the services and their relative costs.*

17. Appendix H – Cost Response – RFP page 51 - If staff is to be listed by position in this table:

a. What information should be included in the Quantity column – number of FTEs, number of hours, etc.?

*See answer on #16.*

b. What unit of cost should be included in the Cost per Item column – total cost per position per year, cost per FTE, cost per hour?

*See answer on #16.*

c. Should the cost in the Cost per Item column include only salaries and benefits, or does the NMCD desire a fully loaded cost in this column – to include direct costs, indirect costs, and overhead costs and margin?

*See answer on #16.*

18. Professional and General Liability Insurance - A standard level of professional and general liability insurance for a contract such as this would be \$1,000,000/\$3,000,000. Is this level of insurance acceptable to the NMCD? Does the NMCD have other requirements for insurance that are not stated in the RFP?

*All insurance requirements are stated in the RFP.*

19. Office Space, Furniture, Equipment, Supplies and Services - Could the NMCD identify what items below will be the responsibility of the vendor to purchase and maintain:

- Office space (including administrative/management personnel)
- Office furniture
- Copiers
- Telephone
- Telephone Service
- Fax Machine
- Fax Lines
- Computers
- Printers
- Internet Access

- Office Supplies
- Psychological Testing Kits
- Reference Materials
- Clinical Supplies and Equipment (workbooks, manuals, etc.)

*NMCD will provide basic supplies and equipment.*

20. Section B.1.E.v. Pricing Structure, RFP page 23 – States, “Pricing/cost proposal for 20 BHS providers and addendum cost schedule for up to 27 BHS providers should be stated this should take into account all aspects stated in the scope of work.” The RFP in several sections states that staffing should include a minimum 20 BHS providers. This section is the only part of the RFP that references 27 BHS providers. Could the NMCD explain the origin and relevance of the 27 BHS providers? How should vendors use or consider this in their pricing? For example, is this a threshold that the NMCD requests that vendors not exceed in their staffing? Please provide as much clarity as possible on the number of personnel the NMCD believes the Contractor will provide by job category.

*The request is for a minimum of 20 BHS staff with a maximum of 27 BHS staff. The offeror should bid it as two separate amounts.*

21. Vendor Payment Methodology – What will be the method of vendor reimbursement under the contract - fixed amount per month (e.g., 1/12 of a fixed, total annual contract value) or through some other variable method of payment?

*This can be discussed in contract negotiations.*

22. The Department’s most recent annual report indicates that the capacity at Springer is 296 and the capacity at Western is 440, summing to a total of 736. NMWCF’s current census is 775 inmates. Will the Department be expanding capacity at Springer or Western to accommodate additional inmate population?

*Yes, if we should have the need.*

- a. What is the expected census for Springer at the start of the contract?

*300 inmates to start*

- b. What is the expected census at Western at the start of the contract?

*450 to start*

- c. Is there an expectation that the census will increase over the next 12 months at either facility that would require additional staff to accommodate the needs of the population?

*No. But if there is a significant increase in the census at either facility which significantly increases the needs for mental health, psychiatric, and substance disorder treatment then there may be a need for more staff.*

23. Is there a plan for an MHTC at Western? If so, how many beds are planned?

*There is currently a plan for a female MHTC at WNMCF. The number of beds is still in the planning stages.*

24. Currently there is a Therapeutic Behavior Unit for PD inmates. There are 10 beds in this unit. Will this program continue at Western? If so, how many beds are planned?

*Yes we would like to continue this program. The number of these beds is undetermined at this point and will depend on population needs.*

25. Should the Contractor anticipate a gradual transition of staff and inmates to the two prisons, or will the transition occur all at once?

*See answer to question #6.*

26. Who will be providing psychiatry services for medication management?

*Corizon is current medical contractor. The current contract expires on May 31, 2016.*

27. How many psychiatry hours per week can the Contractor anticipate being available at each of the two facilities?

*Hours per week is yet undetermined. However, both facilities will have psychiatric coverage appropriate to the needs of the population.*

28. Will either WNMCF or SCC be housing male inmates as well after the females transition to these facilities?

*No*

29. Will WNMCF have both an inpatient Mental Health Treatment Center and a Long Term Care Unit?

*YES*

30. NMWCF currently has its own Behavioral Health Treatment Unit (10 beds) for female patients with Borderline Personality Disorder-spectrum features. Will this unit transition to one of the other facilities? If so, which facility?

*Yes, we will have this program at WNMCF.*

31. If the number of Level 1 and 2 RDAP inmates is greater than 25, will the State consider increasing the number of inmates in that program? If so, is there a process for adjusting staffing level to accommodate changing census?

*Yes. Staff can be reassigned and caseloads may be adjusted as needed to provide programming. Twenty-five inmates is an appropriate maximum number per group, however more than one group may be accommodated at a time.*

32. Amendment 1 adds the New Mexico Women's Correctional Facility to the scope of services. Please clarify what services are to be expected of the vendor at NMWCF. Will women be placed at all three facilities permanently? How many prisoners will be at NMWCF? Does this increase the number of BHS providers in item IV.B.1.E.v. on RFP page 23?

*The staffing for NMWCF is a temporary contingency plan to provide continuous RDAP programming until all the women can be transferred from NMWCF. This should require no overall increase in BHS treatment staff. Once all the women transfer to WNMCF and SCC, then these staff can be reassigned to those facilities.*