

The following questions about the WrapAround Request for Proposal were formally submitted during the established question period:

Q1. Will this be awarded to one agency or multiple agencies?

A.1 While it is anticipated that the award will go to one agency, the RFP allows for multiple agencies

Q2. On page 4, the RFP mentions “evidence based Family Support Services model” – is this referring to the High Fidelity EBP or is a separate EBP requested for the FSS positions?

A2. The RFP is asking for family support services that are evidence based and in alignment with the High Fidelity WrapAround model

Q3. On page 4, under Investor Targets, the first target is focused on decreasing the number of youth placed outside of their “family home”. Would “family home” include kinship placements, non-traditional kin and pre-adoptive placements?

A3. Below is the definition of out-of-home placement for the purposes of state FCSS funding: *“Out-of-home placements occur whenever one or more publicly funded systems place children or adolescents out of their homes, regardless of the reasons for placement, and whether or not systems are paying for placements or whether or not children are adjudicated by the juvenile court (e.g. to include public-system involvement in service coordination/wraparound team planning that results in a child being placed out of the home). Such placements include detention centers, ICF/MR facilities, residential treatment facilities, local or state correctional facilities, foster care homes, nursing homes, etc. FCSS funds cannot be used to pay for out-of-home placements or supportive services for children placed in out-of-home settings or for their families while they are in out-of-home placement. Placement does not include kinship care unless an agency also receives temporary custody, non-clinical respite, medically necessary or psychiatric hospitalization or detention time prior to the 72 hour shelter care/detention hearing”.*

Q4. On page 8, it is stated that intake will be centralized at Stark County Family Council and that vendors will receive notification. What will this intake involve and what documentation will the provider receive for their own intake?

A4. Intake at the Stark County Family Council Office will include the collection of demographic information and completion of a comprehensive risk screen to ensure program eligibility. This information will be shared with the WrapAround service provider agency.

Q5. On page 8 #3 (b), it is stated that “it is the responsibility of the vendor to cover the costs of said training.”

- a.** While it is understood that our agency will pay for mileage and costs to attend the training, does this also mean that the agency bears the cost of training all staff in WrapAround and that those training costs cannot be included in the budget?
- b.** If the answer to number 5 above if yes, the training costs cannot be included in the budget, can the agency seek training elsewhere provided that it is recognized by the High Fidelity Wraparound organization?
- c.** Where are the training(s) typically held, and what is the estimated cost per person for training fees?

A5. The agency is responsible for bearing the cost of training all staff in WrapAround and should build

these expenses into the Budget when determining unit rates for each level of service. There is no set training fee and/or training schedule in Ohio. National trainers, as well as Ohio based trainers, are available and a few are actually located in or near Stark County. Agencies would need to consult with individual trainers to discuss training fees. Historically, agencies have either sent staff to training being offered in another county and/or contracting with Ohio based trainers and inviting other counties to participate for a fee. The Stark County Family Council does not provide the required High Fidelity WrapAround training. An estimated range of trainer fees for the required, three (3) day High Fidelity WrapAround Service Coordinator training is \$900 - \$1350 per day.

Q6. Is the FSS function part of the High Fidelity Wraparound or strictly for “short term services”?

A6. FSS is part of the HFWA process, but on occasion, may offer short term services when an FSS is needed to fill an identified service gap.

Q7. On page 9, it states that FSS’s “will have lived experience”. Does that imply they do not need a degree?

A7. An FSS is required to have “lived experience” but is not required to have a degree

Q8. On page 8, under System of Care, the RFP discusses the one wraparound position shared with Juvenile Court. Will that position remain separate or is it part of the response for this proposal?

A8. Salary and Benefits of the Juvenile Court WrapAround Service Coordinator position is fully funded by the Court, however, the RFP requires a commitment from the provider agency to “house” the position, include them as full members of the WrapAround team and provide supervision and support

Q9. On page 12, #1b, a table of organization is requested – is this to be included in the 15 page limit or can it be added as an attachment?

A9. A table of organization can be added as an attachment and not be included in the 15 page limit

Q10. On page 13, #2c it states to describe family support services. Related to question #2 above, is it expected that this is an evidence based program separate from High Fidelity Wraparound?

A10. No

Q11. Please clarify the roles and responsibilities of the Clinical Reviewer. Will the position review out of home placements for all families enrolled in the Stark County Family Council? How will determinations ultimately be made?

A11. The Clinical Reviewer will work with WrapAround-enrolled youth who are in out of home placement, as well as, youth coming to the attention of the Family Council’s Service Review Collaborative (SRC). (Historically, SRC reviews placement requests for 7 youth per year). Specific roles of the Clinical Reviewer include, but are not limited to:

- Review placement packets and participate in SRC discussions to formulate residential placement recommendations; update SRC on youth progress while youth is in residential treatment or placement and consult with SRC, as needed
- Participate in WrapAround team meetings as needed and communicate with HOME Choice Program Coordinator to ensure alignment of efforts
- Communicate with parties involved in the care of youth a minimum of one time per month; participate in the development of associated plans, goals, and benchmarks; determine length of stay at treatment facility; and assist in the transition of the youth back into their home and the community

- At times this position may require conflict resolution and the assessment of crisis situations and the determination of immediate interventions to preclude further escalation or complication of the situation
- Coordinate linkages of youth in residential placement to ongoing service providers before their return to Stark County. This linkage may include reviewing all assessments and evaluations from existent providers and ensuring there is an updated and accurate diagnostic assessment

Q12. Per page 10 of the RFP, “targeted Medicaid billing amounts should be at least 50% of the cost amounts billed to SCFC.” And, “selected vendors must report to SCFC the amount of dollars billed to Medicaid each month.” What if there are month(s) where Medicaid billing is less than 50% of the costs billed to SCFC? Will the selected vendor(s) not be reimbursed fully for costs invoiced? If reduced reimbursement is the case, how will that work? If a cost is billed to Medicaid but is rejected for reimbursement, can the service(s) be rebilled to Stark County in a later month?

A12. Fluctuation in billing from month to month is anticipated; the targeted Medicaid billing of 50% of costs billed to SCFC is the overall, annual goal. The monthly reports to SCFC is meant to assure that all involved parties are informed of Medicaid billing statuses and provide opportunities to quickly identify and address any barriers. High Fidelity WrapAround services, provided but not paid by Medicaid, can be billed to Stark County Family Council. The agency may be required to provide evidence that Medicaid billing was denied.

Q13. Page 14 of the RFP shows the budget template. The following questions are related to this template:

- a. There is a note in the “Program Materials and Supplies” section that states to set aside a small amount of flexible funding (i.e. \$1000-\$2000)...” – is there a cap/maximum amount that the budgeted line must not exceed?
 - There is not a set cap for the small amount of flexible funding
- b. Non-Personnel Expenses section has a note that “mileage reimbursement costs at \$0.40 per mile” – is this is actual mileage reimbursement rate or are we allowed to use our company mileage reimbursement rate?
 - The contract will only reimburse at .40 cents per mile. This is the established rate of the Stark County Family Council’s administrative agent.
- c. Administration – is there a maximum percentage of the contract that the admin costs must not exceed?
 - The RFP does not identify a maximum percentage for administrative costs but a successful application will show reasonable and generally accepted levels of administrative costs
- d. Page 8 of the RFP indicates that the three-year average for the number of youth served in a fiscal year is 165. Page 10 and page 15 note that “state funding will only pay for face-to-face contact with youth & families when the youth resides in their own home.” Of the 165 youth served on average in a fiscal year, how many of those on average would apply to the state funding?
 - The majority of youth served by WrapAround Service Coordinators and Family Support Specialists remain in their own home. The three-year average for the

number of WrapAround-enrolled youth placed out of their home once a plan of care is established, is only 10%. An additional percentage or small allowance should also be made for families that do not fully engage in services and where face to face contact may not occur

Q13. (See responses in bullets, a-d above)

Q14. What method will be used to determine the number of annual units an agency will provide for the three services (High Fidelity WrapAround, Family Support, and Clinical Review)?

A.14 Each applicant must determine how to establish the unit rates and number of units that must be delivered in order to fully expend the contract amount