

**ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES (ACBH)
REQUEST FOR PROPOSAL (RFP) 19-08
SPECIFICATIONS, TERMS & CONDITIONS
FOR
SANTA RITA JAIL SUBSTANCE USE DISORDER TREATMENT PILOT**

INFORMATIONAL MEETING/ BIDDERS' CONFERENCES

Date	Time	Location
<p style="text-align: center;">Thursday May 30, 2019</p>	<p style="text-align: center;">10:30 am – noon</p>	<p style="text-align: center;">Alameda County Behavioral Health 1900 Embarcadero Cove, Oakland Suite 205, Wildcat Canyon</p>
<p style="text-align: center;">Friday May 31, 2019</p>	<p style="text-align: center;">9:30am – 11:00am</p>	<p style="text-align: center;">Santa Rita Jail 5325 Broder Blvd, Dublin Media Room</p>

**PROPOSALS DUE
by 2:00 pm on Monday June 24, 2019
to
RFP #19-08 c/o Santa Rita Jail Substance Use Treatment Pilot
1900 Embarcadero Cove Suite 205
Oakland, CA 94606
Proposals received after this date/time will NOT be accepted
Contact: Rachel Garcia
Email: Rachel.Garcia2@acgov.org Phone: 510-383-1744**

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I. STATEMENT OF WORK

A. INTENT

It is the intent of these specifications, terms, and conditions for Alameda County Behavioral Health Care Services (hereafter ACBH or County) to seek proposals to provide Substance Use Disorder (SUD) treatment services at Santa Rita Jail to adults projected to be in jail for at least 45 days.

ACBH intends to award one contract to the Bidder selected as the most responsible bidder whose response conforms to the Request for Proposal (RFP) and meets the County requirements. At this time, ACBH has allocated \$340,147 in one time funding for one year (12 months) from California Department of Health Care Services' (DHCS) Expanding Access to Medication Assisted Treatment in County Criminal Justice Settings Grant, Whole Person Care, and other funding sources.

The contract that results from this RFP process will be reimbursed based on actual costs and prorated for the fiscal year at the contract start date. Project reimbursement will be based on actual costs not to exceed the total funding amount of \$340,147 during the pilot period.

Proposals shall form the basis for any subsequent awarded contract. Staffing levels and operating costs must accurately reflect the Bidder's costs for the project. ACBH reserves the right to dissolve a contract if/when awarded Contractor materially alters staff, budgets, deliverables and outcomes any time after the contract award.

The County is not obligated to award any contract as a result of this RFP process. The County may, but is not obligated to, renew any awarded contract. Any renewal of an awarded contract shall be contingent on the availability of funds, awarded Contractor's performance, and continued prioritization of the activities and priority populations as defined and determined by ACBH.

B. BACKGROUND

The Center for Prisoner Health and Human Rights reports that approximately half of prison and jail inmates meet criteria for substance abuse or dependence, and that most incarcerated people with substance abuse issues who are released relapse in the community. Despite the opportunities incarceration presents to connect an often hard-to-reach and underserved population to treatment, only eleven percent of incarcerated individuals in need of substance abuse treatment receive it in jail or prison. Alameda County's Santa Rita Jail (SRJ) has limited in-custody substance use treatment at this time.

DHCS has provided funds to counties participating in a project called Expanding Access to Medication Assisted Treatment (MAT) in County Criminal Justice Settings. Alameda County

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is participating in the first cohort of the Learning Collaborative with this project and has obtained funding for a pilot SUD treatment program at SRJ. In addition to the MAT grant this pilot program is funded through Whole Person Care grant funding, via Alameda County Care Connect¹, another DHCS-funded project to coordinate health, behavioral health, and social services in a patient-centered manner with the goals of improved health outcomes and more efficient and effective use of resources.

C. SCOPE/PURPOSE

The purpose of the pilot is to provide in-custody SUD treatment to adults with identified SUDs and to effectively connect participants to an appropriate SUD program upon release. The awarded Contractor shall provide services to accomplish the following goals:

- Provide individuals with opioid use disorder who are entering into custody access to SUD treatment including counseling that is required for individuals receiving methadone maintenance services;
- Provide individuals with SUDs (not entering custody on Medication Assisted Treatment) access to American Society of Addiction Medicine (ASAM) 1.0 Level and/or ASAM 2.1 Level SUD treatment while incarcerated;
- Conduct comprehensive assessment to effectively link client's to the appropriate services post-release such as mental health and social services at the time of release and post release; and
- Link participants to appropriate SUD treatment resources within Alameda County's Drug Medi-Cal Organized Delivery System at the time of release and post-release.

The awarded Contractor shall provide ASAM 1.0 and 2.1 levels of care².

Level of Care	Service Overview	Service Description and Requirements
1.0	Outpatient Services	Recovery or motivational enhancement therapies/strategies provided to clients less than 9 hours a week and includes all of the following components: <ul style="list-style-type: none"> • Intake; • Individual and Group Counseling; • Patient Education; • Psycho Education Group; • Treatment Group; • Collateral Services; • Crisis Intervention Services; • Treatment Planning and Update; • Comprehensive Case Management;

¹ <https://accareconnect.org/>

² Additional information on ASAM levels of care available in Appendix III.B.

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		<ul style="list-style-type: none"> • Effective linkage to all indicated community services
2.1	Intensive Outpatient Services	Structured programming services to treat multidimensional instability for a minimum of 9 or more hours with a maximum of 19 hours a week.

The awarded Contractor shall provide services to all inmates in Unit 22 West at SRJ. The awarded Contractor shall provide services to a maximum of 96 unduplicated individuals at any given time.

D. BIDDER MINIMUM QUALIFICATIONS

To be eligible to participate in this RFP, Bidders must successfully demonstrate in their proposal how they meet the following Bidder Minimum Qualifications:

- Have at least three years of experience providing jail based services³; and
- Have at least three years of experience providing SUD services to adults and/or young adults in the past five years.

Proposals that exceed the contract maximum amount or are unreasonable and/or unrealistic in terms of budget, as solely determined by ACBH, shall be disqualified from moving forward in the evaluation process.

Bidders are eligible to participate in the RFP process if they meet the Bidder Minimum Qualifications. ACBH will disqualify proposals that do not demonstrate that Bidder meets the specified Bidder Minimum Qualifications, and these disqualified proposals will not be evaluated by the Evaluation Panel and will not be eligible for contract award under this RFP. ACBH has the right to accept all or part of the proposed project model at its discretion.

E. SPECIFIC REQUIREMENTS

The scope of work for awarded contracts from this RFP will include conformance with all of the following throughout the project period, as needed:

- Recruit, hire, and retain culturally proficient and qualified staff;
- Project staff must obtain jail clearance;
- Project staff shall be on site during project hours;
- Utilize ASAM criteria as part of an individualized substance use assessment throughout treatment, and up to and inclusive of discharge, to effectively link individual to an appropriate SUD program upon release, as well as other needed services and supports;
- Project staff must be trained in ASAM patient placement criteria;

³ Jail based services include services provided by agency staff in a jail (not prison). For the purpose of this RFP, televisits (non in-person visits) are not considered jail based.

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- Conduct comprehensive assessment that meets the Alameda County's Care Connect standard of care;
- Practice Care Connect standards of comprehensive case management;
- Provide pre-release case management, and post-release follow-up to ensure that clients have successfully connected with SUD treatment, primary care, benefits enrollment, and other needed services;
- Project staff will coordinate services with Wellpath⁴ for all MAT clients;
- Project staff must participate in appropriate Alameda County Care Connect trainings and/or network orientation⁵;
- Utilize Motivational Interviewing (MI), Cognitive Behavioral Therapy (CBT), and Seeking Safety;
- Utilize Evidence Based Practices (EBPs) or promising practices that address criminogenic needs and risk factors as part of the substance use treatment such as Thinking for Change;
- Data entry in a timely manner, as instructed, using the County's electronic information management and claiming system (currently Clinician's Gateway and InSYST); and
- Complete trainings required to access County's electronic information management and claiming systems, which may include Alameda County Care Connect Community Health Record.

F. BIDDER EXPERIENCE, ABILITY AND PLAN

1. Understanding of and Experience with Priority Population Needs

The priority population for this RFP includes adults, 18 and over, projected to be in jail for at least 45 days. Inmates must meet medical necessity for SUD treatment, and qualify for the ASAM 1.0 and 2.1 levels of care treatment needed to participate. Eligible individuals must also meet security clearance requirements for the housing unit, Unit 22 West, and must sign a consent to treatment agreement, and release of information. As well as be offered the opportunity to sign the consumer authorization to share information via the Community Health Record.

The awarded Contractor shall provide services to adults in the Unit 22 West housing unit at SRJ. Unit 22 West consists of 48 cells with two bunks per cell and can house up to 96 male inmates⁶ at any given time. ACBH estimates that approximately 50 inmates will receive Methadone Maintenance therapy, for whom treatment services will be coordinated with medical staff from Wellpath. Inmates referred for services may have a variety of criminal backgrounds and contributing factors. Clients may have complex bio-

⁴ Wellpath is Alameda County Sheriffs Office's contracted primary care provider for in-custody inmates.

⁵ Trainings calendar through June 2019: <http://accareconn.wpengine.com/wp-content/uploads/2019/02/CCA-Training-Calendar-022119.pdf>

⁶ May include transgender and cis males.

psychosocial and/or medical needs in addition to SUD treatment services. The awarded Contractor will provide SUD treatment services to eligible clients.

Risks associated with the priority population include recidivism, continuation of or return to substance use and abuse, and opioid overdose upon release from jail, especially if they are not maintained on MAT while in custody. The Center of Prison Health and Human Rights estimates that more than 50 percent of all inmates meet criteria for SUD in the DSM IV. Those individuals who are entering into custody on MAT for opioids have been at risk as medical programming has not been able to maintain these clients on their medication while meeting the regulatory requirements of providing monthly counseling.

Successful Bidders will demonstrate knowledge, experience, and understanding of the needs, issues, and challenges faced by incarcerated individuals with substance use disorders. Bidders shall identify strategies to address barriers faced by clients and demonstrate experience in engaging clients in services.

2. Service Delivery Approach

The awarded Contractor will provide ASAM Levels 1.0 and 2.1 of care to adults in Unit 22 West at SRJ. The awarded Contractor will have designated space within SRJ to provide project services. Services will occur in open areas in Unit 22 West with partition areas for one on one services. Unit 22 West is around 4,000 square feet of space with a large open common area space with bench seating for two separate groups of up to 15. Desks or tables with privacy walls for individual counseling and case management sessions will be added to the unit.

Wellpath will conduct initial inmate intake and flag potential SUD clients to refer to Adult Forensic Behavioral health (AFBH) for assessment, which may then result in placement in Unit 22 West. Inmates who may benefit from SUD services may also be identified by the Sheriff's Deputy, AFBH, and Drug Court. In-custody adults on Methadone at the time of entering SRJ will be referred for treatment services and housed in Unit 22 West, unless they do not meet security clearance criteria. Methadone maintenance dosing will be conducted by qualified Wellpath staff. It is the expectation that project staff coordinate services with Wellpath for all MAT clients.

At client intake into the unit, project staff will conduct an ASAM assessment⁷ to determine if individuals meet the appropriate treatment level of care. Project staff may need to conduct assessments in other units or facilities within the jail, (e.g. the medical clinic) to assess and engage clients outside of Unit 22 West.

⁷ Example of ASAM assessment in Clinician's Gateway included in Appendix III.C.

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Project staff shall incorporate a BASIC intake for all clients. The BASIC intake is based on principles for whole-person, culturally affirming, and consumer-centered care. The BASIC intake framework includes identifying:

- Basic needs of family and self, including assessment of risk to or by the consumer while recognizing and respecting their dignity, connection, and autonomy;
- Activities of daily living;
- Social and cultural supports;
- Income and resources including insurance, benefits, government and other entitlement documentation for themselves and their families/ supports; and
- Coordinated care with other services providers as well as needs and linkage with additional services.

Project staff shall develop individualized treatment plans for clients based on ASAM assessments and BASIC intake. Clients shall receive at least two group counseling sessions per week, as well as individual counseling and case management services as needed. Counseling, case management, and group work shall be provided to clients from 9:00 am to 3:00 pm. Project staff shall also support clients in identifying and engaging family, natural supports, and/or support networks. Adjunct services in support of whole person treatment (such as 12 Step Groups, education, training, mindfulness and spirituality groups) may also be offered to clients by other providers in the morning or afternoon. Staff shall use the remainder of the work day for administration and clinical documentation.

The expected maximum length of stay in Unit 22 West SUD treatment pilot is up to six months, however there is no strict maximum length of stay. Individuals may continue to be served for in custody treatment services based on clinical need. Project services must include supporting clients with discharge planning. Discharge planning will include supporting clients with care transitions, and identifying and linking to resources post release. Resources may include identifying eligible benefits, benefits enrollment, housing supports, health care resources including primary care, mental health, SUD treatment/ services, dental, case and care management, and other services as needed.

Project services shall include EBPs, Promising Practices, and curricula that address criminogenic needs and risk factors (e.g. Thinking for Change) within the context of substance use treatment. The awarded Contractor shall incorporate EBPs, specifically MI, CBT, and Seeking Safety. Bidders shall propose their plan to integrate EBPs in services.

Bidders will be evaluated based on the description of services, including how well proposed practices will meet the needs of the priority population and the Bidder's experience in implementing such practices.

3. **Planned Staffing and Organizational Capacity**

Bidders shall include a staffing structure that is well matched to project services. Bidders shall demonstrate how their current and planned organizational infrastructure will successfully implement the required activities.

At a minimum, bidders shall include the following staff and Full Time Equivalent (FTE) in their proposed staffing plan:

- Intake, Discharge, and Pre-Release Case Manager at 1.0 FTE
 - The Intake and Discharge Coordinator shall be a Licensed Practitioner of the Healing Arts (LPHA).
- SUD Counselors at 2.0 FTE
 - SUD Counselors shall be certified or registered SUD Counselors.
- Project Supervisor at 0.5 FTE
 - Project Supervisor must be an LPHA in order to provide clinical oversight, supervision, and support.

Additional staff may be included as appropriate and with justification demonstrating their role and how it will improve project services. Bidders are encouraged to integrate multilingual project staff. Bidders shall identify the language capacity of staff.

Project staff must pass the Sheriff Office's site clearance and background process in order to provide services. To ensure project staff obtain the necessary clearance to deliver services in SRJ, the awarded Contractor shall start background and clearance process for staff prior to contract start date. Bidders shall describe their experience in obtaining jail clearance for staff.

Project staff must complete appropriate County trainings such as accessing the County's electronic information management and claiming systems as appropriate. Staff may also be required to complete Alameda County Care Connect trainings to access and utilize ACBH information management and claiming systems, as well as to establish a common base level of Whole Person Care skills and knowledge across multiple sectors that serve complex clients.

Bidders shall demonstrate a current and planned organizational infrastructure to successfully implement the project. Services shall be provided by an organization with appropriate operations in terms of capacity, infrastructure, staffing, and hiring. Appropriate infrastructure, staffing, and hiring includes:

- Plan for hiring, training, and supporting project staff;
- Plan for providing appropriate and regular clinical supervision to project staff;
- Organizational capacity to support staff working at SRJ;
- Organizational capacity to provide comprehensive, coordinated services; and
- Organizational capacity to track and enter data into the County's electronic information management and claiming system (currently InSyst and Clinician's Gateway).

Bidders will be evaluated based on their description of their staffing plan and organizational capacity to provide services. Bidders must also include their overall organizational chart and where the project will sit within the agency that demonstrates the agency's infrastructure to ensure there is necessary oversight, supervision, and support to comply with project requirements.

4. Forming Partnerships and Collaboration

The awarded Contractor shall work with ACBH including AFBH, Alameda County Sheriff's Department, contracted jail staff including Wellpath, AC Care Connect network of housing supports and other care transitions services, Community Based Organizations (CBOs), medical providers, mental health providers, and other SUD treatment providers and services. Bidders shall also describe any existing or proposed partnerships to support formerly incarcerated adults in housing services, benefits enrollment, and support services.

To strengthen service linkages, the awarded Contractor will use existing partnerships and identify additional collaborative partnerships. Bidders will propose their plan for building on existing partnerships and establishing new relationships to support clients in meeting their needs. Bidders shall demonstrate experience working with other service providers and agencies to support clients in linking with necessary services.

5. Ability to Track Data

The awarded Contractor shall provide services to a maximum of 96 unduplicated individuals at any given time during the pilot period.

The awarded Contractor shall track data and outcomes for the purpose of reporting and for continuous quality improvement of services. The awarded Contractor will track and report on the following measures monthly:

- At least 50 percent of clients will receive pre-release case management services; and
- At least 50 percent of post-release program participants will be connected with and receive post-release substance use treatment in the community within 30 days of release.

Bidders may propose additional benchmarks for outcomes and provide rationale for requested benchmarks.

The awarded Contractor will need to track ASAM level of care determination, treatment plan, client attendance, and client progress. The awarded Contractor will track and report on clients released from SRJ who are receiving SUD treatment services in the community. The awarded Contractor will also need to report on housing status, Medi-Cal status, and

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successful linkage to essential services, including, at a minimum, primary care and care management for clients post-release.

Bidders shall propose a benchmark measure for the following outcome and provide rationale: Percent of eligible post release program participants who will be connected with and receive post release services including, at a minimum, primary care, and Medi-Cal screening and enrollment if eligible.

The awarded Contractor will enter client encounter data in InSyst and Clinician's Gateway, ACBH's electronic information management and claiming system, although billing for services is not required at this time. The awarded Contractor must utilize Clinician's Gateway, ACBH's electronic system for tracking client progress notes. The awarded Contractor may also use their own Electronic Health Records (EHR) system as appropriate.

The awarded Contractor will conduct quarterly project updates to ACBH using an ACBH-approved template. ACBH reserves the right to determine and evaluate project performance measures and to work with the awarded Contractor to alter project and outcome measures, as appropriate.

Bidders will be evaluated based on their plan for meeting project outcomes as well as their ability to track client progress.

II. INSTRUCTIONS TO BIDDERS

A. COUNTY CONTACTS

All contact during the competitive RFP process shall be through the RFP contact, only.

The ACBH website <http://www.acbhcs.org/Docs/docs.htm#RFP> and the General Services Agency (GSA) website https://www.acgov.org/gsa_app/gsa/purchasing/bid_content/contractopportunities.jsp are the official notification and posting places for this RFP and any Addenda.

The evaluation phase of the competitive process shall begin upon receipt of proposals until contract award. Bidders shall not contact or lobby CSC/Evaluation Panelists during the evaluation process. Attempts by Bidders to contact CSC/Evaluation Panelists may result in disqualification of the Bidder's proposal.

All questions regarding these specifications, terms and conditions shall be submitted in writing, preferably via e-mail, as specified in the Calendar of Events to:

Rachel Garcia
1900 Embarcadero Cove, Suite 205
Oakland, CA 94606
Email: Rachel.Garcia2@acgov.org

B. CALENDAR OF EVENTS

Event	Date/Location
Request for Proposals (RFP) Issued	Tuesday May 21, 2019
Bidder's Written Questions Due	By 5:00 pm on the day of 2 nd Bidder's Conference – ACBH strongly encourages Bidders to submit written questions earlier.
1 st Bidders' Conference	Thursday May 30, 2019 10:30-noon 1900 Embarcadero Cove, Oakland Suite 205, Wildcat Canyon
2 nd Bidders' Conference	Friday May 31, 2019 9:30-11:00 5325 Broder Blvd, Dublin Santa Rita Jail Media Room
Santa Rita Jail Walk-Through	Friday May 31, 2019 11:00 – 12:30 Bidders may bring up to 3 representatives from their agency. Please RSVP to the event here: rclippinger@acgov.org : https://www.eventbrite.com/e/rfp-19-08-santa-rita-jail-walk-through-tickets-6201117923?aff=eivtefrnd AND Complete the Santa Rita Clearance Form including in the Appendix III.E. on page 49 and send to rclippinger@acgov.org by Friday May 24, 2019
Addendum Issued	Friday June 7, 2019
Proposals Due	Monday June 24, 2019
Review/Evaluation Period	July 1, 2019 – July 31, 2019
Oral Interviews (as needed)	July 31, 2019
Award Recommendation Letters Issued	August 7, 2019
Board Agenda Date	September 2019
Contract Start Date	October 1, 2019

Note: Award Recommendation, Board Agenda and Contract Start dates are approximate. Other dates are subject to change. Bidders will be notified of any changes via email. It is the responsibility of each Bidder to be familiar with all of the specifications, terms and conditions. By submission of a proposal, Bidder certifies that if awarded a contract Bidder shall make no claim against the County based upon ignorance of conditions or misunderstanding of the specifications.

C. SMALL LOCAL EMERGING BUSINESS (SLEB) PREFERENCE POINTS

The County is vitally interested in promoting the growth of small and emerging local businesses by means of increasing the participation of these businesses in the County's purchase of goods and services.

As a result of the County's commitment to advance the economic opportunities of these businesses, Bidders must meet the County's SLEB requirements in order to be considered for the contract award. These requirements can be found online at:

<http://acgov.org/auditor/sleb/overview.htm>

For purposes of this proposal, applicable industries include, but are not limited to, the following North American Industry Classification System (NAICS) Codes: 621420

A small business is defined by the [United States Small Business Administration](#) (SBA) as having no more than the number of employees or average annual gross receipts over the last three (3) years required per SBA standards based on the small business's appropriate NAICS code.

An emerging business is defined by the County as having either annual gross receipts of less than one-half (1/2) that of a small business OR having less than one-half (1/2) the number of employees AND that has been in business less than five (5) years.

D. BIDDERS' CONFERENCES

ACBH strongly recommends that Bidders thoroughly read the RFP prior to attending any Bidders' Conferences. ACBH shall hold two Bidders' Conferences. Bidders' Conferences will be held to:

- Provide an opportunity for Bidders to ask specific questions about the program and request RFP clarification; and
- Provide the County with an opportunity to receive feedback regarding the program and RFP.

ACBH shall respond to written questions submitted prior to the Bidders' Conferences, in accordance with the Calendar of Events and verbal questions received at the Bidders' Conferences, whenever possible at the Bidders' Conferences. ACBH shall address all questions and include the list of Bidders' Conferences attendees in an Addendum following the Bidders' Conferences in accordance with the Calendar of Events section of this RFP.

Bidders are not required to attend the Bidders' Conferences. However, attendance to at least one Bidders' Conference is strongly encouraged in order to receive information to assist Bidders in formulating proposals.

Failure to participate in a Bidders' Conference shall in no way relieve the Bidder from furnishing program and services requirements in accordance with these specifications, terms and conditions and those released in any Addenda.

Though not required, Bidders are highly advised to participate in the site walk-through at SRJ to help inform proposed program services. Attendees of the 1st Bidders' Conference may wish to show up for the walk-through only which follows after the 2nd Bidders' Conference on Friday May 31 from 11:00 to 12:20.

E. SUBMITTAL OF PROPOSALS/BIDS

1. All proposals must be SEALED and received by ACBH **no later than 2:00 pm on the due date and location specified on the RFP cover and Calendar of Events in this RFP.** ACBH cannot accept late and/or unsealed proposals. If hand delivering proposals, please allow time for parking and entry into building.

ACBH shall only accept proposals at the address and by the time indicated on the RFP cover and in the Calendar of Events. Any proposals received after said time and/or date or at a place other than the stated address cannot be considered and shall be returned to the Bidder unread/unopened.

All proposals, whether delivered by an employee of Bidder, U.S. Postal Service, courier or package delivery service, must be received and time stamped at the stated delivery address prior to the time designated. ACBH's timestamp shall be considered the official timepiece for the purpose of establishing the actual receipt of bids.

2. Bidders must submit proposals which clearly state Bidder and RFP name. Proposals shall include:
 - a. One original hard copy proposal in a three-ring binder, with original ink signatures. Original proposal is to be clearly marked on the cover (it should be clear who the Bidder is on the front of the binder);
 - The original proposal must include evidence that the person(s) who signed the proposal is/are authorized to execute the proposal on behalf of the Bidder. A signed statement by either the Executive Director or the Board President on an agency letterhead will meet this requirement.
 - b. Seven copies of proposal. Copies must be unbound without a three-ring binder.
 - c. Enclosed with the hard copy include, a USB flash drive clearly marked with the Bidder and RFP name with the following saved on it:
 - An electronic copy of the proposal, saved with Bidder's name;
 - An electronic Excel copy of the completed Exhibit B-1 Program Budget, saved with the Bidder's name.

The County requests that all proposals submitted shall be printed double-sided and on minimum thirty percent post-consumer recycled content paper.⁸

Bidders shall ensure that proposals are:

- Single spaced
- Maximum 1 inch margins
- 11-point Arial font
- Conform to the maximum page limits

3. **The County will not consider telegraphic, electronic or facsimile proposals.**
4. Bidder agrees and acknowledges all RFP specifications, terms and conditions and indicates ability to perform by submission of proposal.
5. Submitted proposals shall be valid for a minimum period of eighteen months.
6. All costs required for the preparation and submission of a proposal shall be borne by Bidder.
7. Proprietary or Confidential Information: No part of any proposal response is to be marked as confidential or proprietary. County may refuse to consider any bid response or part thereof so marked. Bid responses submitted in response to this RFP may be subject to public disclosure. County shall not be liable in any way for disclosure of any such records. Additionally, all proposals shall become the property of County. County reserves the right to make use of any information or ideas contained in submitted proposals. This provision is not intended to require the disclosure of records that are exempt from disclosure under the California Public Records Act (Government Code Section 6250, et seq.) or of "trade secrets" protected by the Uniform Trade Secrets Act (Civil Code Section 3426, et seq.).
8. All other information regarding proposals shall be held as confidential until such time as the CSC/Evaluation Panel has completed their evaluation, notification of recommended award has been made and the contract has been fully negotiated with the recommended awardees named in the intent to award/non-award notification. The submitted proposals shall be made available upon request no later than five calendar days before approval of the award and contract is scheduled to be heard by the Board of Supervisors. All parties submitting proposals, either qualified or unqualified, shall receive mailed intent to award/non-award notification, which shall include the name of the Bidder(s) recommended for award of this service. In addition, recommended award information will be posted on the ACBH website.
9. Each proposal received, with the name of the Bidder, shall be entered on a record, and each record with the successful proposal indicated thereon shall, after the negotiations and award of the order or contract, be open to public inspection.

⁸ Inability to comply with this recommendation will have no impact on the evaluation and scoring of proposals.

10. California Government Code Section 4552: In submitting a bid to a public purchasing body, the Bidder offers and agrees that if the bid is accepted, it will assign to the purchasing body all rights, title, and interest in and to all causes of action it may have under Section 4 of the Clayton Act (15 U.S.C. Sec. 15) or under the Cartwright Act (Chapter 2, commencing with Section 16700, of Part 2 of Division 7 of the Business and Professions Code), arising from purchases of goods, materials, or services by the Bidder for sale to the purchasing body pursuant to the bid. Such assignment shall be made and become effective at the time the purchasing body tenders final payment to the Bidder.
11. Bidder expressly acknowledges that it is aware that if a false claim is knowingly submitted (as the terms “claim” and “knowingly” are defined in the California False Claims Act, Cal. Gov. Code, §12650 et seq.), County will be entitled to civil remedies set forth in the California False Claim Act. It may also be considered fraud and the Contractor may be subject to criminal prosecution.
12. The undersigned Bidder certifies that it is, at the time of bidding, and shall be throughout the period of the contract, licensed by the State of California to do the type of work required under the terms of the Contract Documents. Bidder further certifies that it is regularly engaged in the general class and type of work called for in the Bid Documents.
13. The undersigned Bidder certifies that it is not, at the time of bidding, on the California Department of General Services (DGS) list of persons determined to be engaged in investment activities in Iran or otherwise in violation of the Iran Contracting Act of 2010 (Public Contract Code Section 2200-2208).
14. It is understood that County reserves the right to reject this bid and that the bid shall remain open to acceptance and is irrevocable for a period of 180 days, unless otherwise specified in the Bid Documents.

F. RESPONSE FORMAT/PROPOSAL RESPONSES

Bidders may use the provided MS Word Bid Response Template to address and complete your proposals. The person(s) administering the competitive process will review each proposal for completeness against the RFP requirements and ensure that responses conform to a **total page maximum of 23**. Bidders cannot submit non-material documents after the proposal due date, in order to complete their proposal. Proposals with any missing items of submittals as outlined in the RFP and any Addenda shall be deemed incomplete and may be rejected.

Proposals shall be complete, substantiated, concise and specific to the information requested. Any superfluous and unrequested material submitted with the bid will be removed and will not be viewed by the Evaluation Panel. Any material deviation from the requirements may be cause for rejection of the proposal, as determined at ACBH' sole discretion.

TABLE 1

The proposal sections, instructions and page maximums are contained in Table 1. **Proposal shall not exceed 23 pages excluding Exhibits and Attachments.**

Section	Instructions	Suggested Page Max.
<p>1. EXHIBITS AND ATTACHMENTS</p>	<p>EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE</p>	<p>N/A</p>
	<p>EXHIBIT D: EXCEPTIONS, CLARIFICATIONS AND AMENDMENTS</p>	<p>N/A</p>
	<p>SLEB PARTNERING SHEET</p>	<p>N/A</p>
	<p>EXHIBIT C: INSURANCE REQUIREMENTS</p>	<p>N/A</p>
<p>2. REFERENCES</p>	<p>a. References</p> <p>Use the Bid Template to provide three current and three former references that Bidder worked with on a similar scope, volume and requirements to those outlined in this RFP. Bidders must verify that the contact information for all references provided is current and valid. Bidders are strongly encouraged to notify all references that the County may be contacting them to obtain a reference.</p> <p>The County may contact some or all of the references provided in order to determine Bidder’s performance record on work similar to that described in this request. The County reserves the right to contact references other than those provided in the proposal and to use the information gained from them in the evaluation process.</p> <p>Do not include ACBH staff as references. Provide a list of <u>six (6)</u> total references – three (3) current and three (3) former, please provide the following:</p> <ul style="list-style-type: none"> • Company Name • Reference Name • Address 	<p>N/A</p>

Section	Instructions	Suggested Page Max.
	<ul style="list-style-type: none"> • Phone number • E-mail address • Services Provided/Date(s) of Service 	
<p>3. LETTER OF TRANSMITTAL/ EXECUTIVE SUMMARY</p>	<p>Use MS Word to complete and submit a synopsis of the highlights and benefits of the proposal, including total funding request, and staffing overview.</p>	<p>1</p>
<p>4. BIDDER MINIMUM QUALIFICATIONS</p>	<p>Use MS Word to describe and demonstrate how Bidder meets all of the criteria:</p> <ul style="list-style-type: none"> • Have at least three years of experience providing jail based services; and • Have at least three years of experience providing SUD services to adults and/or young adults in the past five years. 	<p>2</p>
<p>5. BIDDER EXPERIENCE, ABILITY, AND PLAN</p>	<p>a. Describe, in detail, Bidder’s Understanding and Experience with the Priority Population Needs including:</p>	<p>(4)</p>
	<p>i. Demonstrate Bidder’s understanding of the priority population, including:</p> <ol style="list-style-type: none"> 1. Strengths and protective factors; 2. Risk factors and barriers; 3. Criminal factors and different reasons for incarceration; 4. Bio-psycho social needs; and 5. Challenges with accessing and engaging in services. 	<p>2</p>
	<p>ii. Describe Bidder’s experience working with the priority population, including:</p> <ol style="list-style-type: none"> 1. Experience providing services in jails and to the priority population; 2. Experience working with individuals with complex bio-psychosocial, medical, and SUD treatment needs; 3. Successful strategies to address barriers faced by clients; and 	<p>2</p>

Section	Instructions	Suggested Page Max.	
	<ol style="list-style-type: none"> 4. Experience and previous success in engaging incarcerated individuals in services. Including supporting individuals with care transitions, identifying and linking with services. 		
5. BIDDER EXPERIENCE, ABILITY, AND PLAN	b. Describe in detail, Bidder’s Service Delivery Approach, including:	(4)	
	i. Bidder’s plan to deliver services, including:	2	
	<ol style="list-style-type: none"> 1. Plan to conduct ASAM assessment and incorporate a BASIC intake for all clients. Including Bidder’s plan to use assessment and intake to develop individualized treatment plans including identifying client strengths and needs; 2. Plan to provide group counseling, individual counseling, and case management services to all clients regularly. Including proposed plan to engage clients in services; 3. Plan to create a healing and welcoming environment responsive to client needs; and 4. Proposed EBPs, promising practices, and curricula that address criminogenic needs and risk factors. 		
	ii. Bidder’s plan to support clients with discharge, including:		2
	<ol style="list-style-type: none"> 1. Plan to support clients with discharge planning including care transitions and identifying and linking to appropriate resources, including Medi-Cal enrollment. Identify potential resources; and 2. Plan to support clients post-release to ensure successful linkage. 		
c. Describe, in detail, Bidder’s Planned Staffing and Organizational Capacity, including:	(4)		
	i. Roles and responsibilities of project staff, including:	2	
	<ol style="list-style-type: none"> 1. Plan for project staffing including staff positions and FTE, language capacities, roles, responsibilities, and supervision structure. Include tasks necessary to provide project services and how they will be assigned to staff; 		

Section	Instructions	Suggested Page Max.
	<ol style="list-style-type: none"> 2. Plan for hiring, training, supervising, and retaining staff. Include how staff will reflect the priority population and language profiles; and 3. Plan for supervision and oversight of proposed project components. 	
	<p>ii. Bidder’s planned organizational infrastructure, including:</p> <ol style="list-style-type: none"> 1. Description of how program services will be integrated into Bidder’s existing organizational structure and services. Include organizational chart (include as Attachment 1A) and proposed project chart that illustrates where the project will sit within the organization (include as Attachment 1B). 2. Experience obtaining clearance for staff to provide services in jails or prisons; 3. Capacity to support staff working at SRJ; 4. Capacity to provide comprehensive, coordinated services; and 5. Experience utilizing electronic information management and claiming systems. 	2
	<p>d. Describe, in detail, Bidder’s experience in Forming Partnerships and Collaboration, including:</p>	(2)
<p>5. BIDDER EXPERIENCE, ABILITY, AND PLAN</p>	<p>i. Describe in detail, Bidder’s ability and experience in Forming Partnerships and Collaborations including:</p> <ol style="list-style-type: none"> 1. Strategies to collaborate and experience collaborating with ACBH - including AFBH, Alameda County Sheriff’s Department, Wellpath, AC Care Connect network of housing supports and other transition services, CBOs, medical providers, mental health providers, and SUD treatment providers and services; 2. Experience or proposed partnerships to support formerly incarcerated adults with housing services, benefits enrollment, and support services; and 3. Provide examples of experience and results of these collaborative efforts. Include existing program partnerships and collaborations and how these partnerships and collaborations will support services. 	2

Section	Instructions	Suggested Page Max.
	<p>e. Describe, in detail, Bidder’s Experience and Plan to Track Data and Outcomes, including Bidder’s plan for collecting data specified in this RFP and tracking outcomes for quality improvement, including:</p> <p>i. Describe, in detail, Bidder’s Experience and Plan to Track Data and Outcomes, including Bidder’s plan for collecting data specified in this RFP and tracking outcomes for quality improvement, including:</p> <ol style="list-style-type: none"> 1. Experience with data collection, tracking, and reporting including data tracking tools, systems, or EHR; 2. Plan for monitoring program measures and outcomes, including tracking ASAM level of care determination, treatment plan, client attendance, and client progress. If Bidder is proposing benchmark measures different from those included in RFP, provide rationale; and 3. Plan for tracking clients released from SRJ receiving SUD treatment services in the community. 	<p>(2)</p> <p>2</p>
<p>6. IMPLEMENTATION PLAN AND MITIGATION OF RISK AND BARRIERS</p>	<p>a. Bidder’s Implementation Schedule and Plan with due dates around the following activities:</p> <ol style="list-style-type: none"> i. Staff hiring and training; ii. Staff start background and clearance process; and iii. Deliver SUD treatment services at SRJ. 	<p>1</p>
	<p>b. Bidder’s identification and strategies for mitigation of risks and barriers, which may adversely affect program implementation.</p>	<p>1</p>
	<p>Budget and Budget Narrative</p> <p>Budget</p> <ol style="list-style-type: none"> a. Cost-Coefficient – Bidder does not need to submit anything additional for this. b. Complete and submit one BUDGET WORKBOOK (saved in Excel). 	<p>(2)</p> <p>N/A</p>

Section	Instructions	Suggested Page Max.
7. COST	See Budget Instructions tab. Complete and submit all worksheets in the Workbook.	
	<p>c. Provide a detailed Budget Narrative to explain the costs and calculations in the budget. The narrative must match the budget, and be aligned with the requirements of this RFP. Narrative should explain how calculations were made on the following and provide explanation on any variances in costs:</p> <ol style="list-style-type: none"> 1. Required Staffing 2. Salaries and Benefits 3. Operating Expenses 4. Administrative and/or Indirect Costs 	2

G. EVALUATION CRITERIA/SELECTION COMMITTEE

All proposals that pass the initial Evaluation Criteria which are determined on a pass/fail basis (Bidder Minimum Qualifications, Completeness of Response, Conformance to Page Limitations, and Debarment and Suspension) shall be evaluated by the CSC/Evaluation Panel. The CSC/Evaluation Panel may be composed of County staff and other individuals who may have expertise or experience in the RFP content. The CSC/Evaluation Panel shall score and recommend a Contractor in accordance with the evaluation criteria set forth in this RFP. The evaluation of the proposals for recommendation shall be within the sole judgment and discretion of the CSC/Evaluation Panel.

All contact during the evaluation phase shall be through the ACBH contact person only. Bidders shall neither contact nor lobby evaluators during the evaluation process. Attempts by Bidder to contact and/or influence members of the CSC/Evaluation Panel may result in disqualification of Bidder.

The CSC will evaluate each proposal meeting the minimum qualifications and requirements set forth in this RFP. Bidders should bear in mind that any proposal that is unrealistic in terms of the technical or schedule commitments, or unrealistically high or low in cost, shall be deemed reflective of an inherent lack of technical competence or indicative of a failure to comprehend the complexity and risk of the County's requirements as set forth in this RFP.

As a result of this RFP, the County intends to award one contract to the responsible Bidder whose response conforms to the RFP and whose proposal presents the greatest value to the County, all evaluation criteria considered. The combined weight of the evaluation criteria is greater in importance than cost in determining the greatest value to the County. The goal is to award a contract to the Bidders that demonstrate the best quality as determined by the combined weight of the evaluation criteria. The County may award a contract of higher qualitative competence over the lowest priced proposal.

The basic information that each proposal section should contain is specified in section II. F. These specifications should be considered as requirements. Much of the material needed to present a comprehensive proposal can be placed into one of the sections listed in II. F. However, other criteria may be added to further support the evaluation process whenever such additional criteria are deemed appropriate in considering the nature of the services being solicited.

Each of the Evaluation Criteria below shall be used in ranking and determining the quality of proposals. Proposals shall be evaluated according to each Evaluation Criteria and scored on a zero to five-point scale shown in Table 2. The scores for all the Evaluation Criteria shall be added according to their assigned weight, as shown in Table 3, to arrive at a weighted score for each proposal. A proposal with a high weighted total shall be deemed of higher quality than a proposal with a lesser-weighted total. The final maximum score for any program is five

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hundred fifty (550) points including the possible fifty (50) points for local and small, local and emerging, or local preference points (maximum 10% of final score).

The evaluation process may include a two-stage approach including an initial evaluation of the written proposal and preliminary scoring to develop a short list of Bidders that will continue to the final stage of oral interview and reference checks. The preliminary scoring will be based on the total points, excluding points allocated to references, and oral interview.

If the two-stage approach is used, the three Bidders that receive the highest preliminary scores and with at least 200 points shall be invited to participate in an oral interview. Only the Bidders meeting the short list criteria shall proceed to the next stage. All other Bidders shall be deemed eliminated from the process. All Bidders shall be notified of the short list participants; however, the preliminary scores at that time shall not be communicated to Bidders.

The zero to five-point scale range is defined in Table 2.

TABLE 2

Score	Label	Description
0	Not Acceptable	Non-responsive, fails to meet RFP specification. The approach has no probability of success. If a mandatory requirement this score shall result in disqualification of proposal.
1	Poor	Below average, falls short of expectations, is substandard to that which is the average or expected norm, has a low probability of success in achieving objectives per RFP.
2	Fair	Has a reasonable probability of success, however, some objectives may not be met.
3	Average	Acceptable, achieves all objectives in a reasonable fashion per RFP specification. This shall be the baseline score for each item with adjustments based on interpretation of proposal by Evaluation Committee members.
4	Above Average/ Good	Very good probability of success, better than that which is average or expected as the norm. Achieves all objectives per RFP requirements and expectations.
5	Excellent/ Exceptional	Exceeds expectations, very innovative, clearly superior to that which is average or expected as the norm. Excellent probability of success and in achieving all objectives and meeting RFP specification.

The evaluation criteria and respective weights for this RFP are contained in Table 3.

TABLE 3

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
1. EXHIBITS AND ATTACHMENTS	Reviewed for completeness	<p>Complete/Incomplete</p> <p>Responses to this RFP must be complete. Responses that do not include the proposal content requirements identified within this RFP and subsequent Addenda and do not address each of the items listed below will be considered incomplete. Additionally, bid responses that do not conform to the page limitations in Table 1, will be rated a Fail in the Evaluation Criteria and will receive no further consideration.</p>	Pass/Fail
2. BIDDER REFERENCES	ACBH will accept only non-ACBH references. ACBH will check references for Bidders placed on the shortlist and ask the references standard questions, which will be evaluated by the Evaluation Panel.	<p>How do the Bidder's references respond to the following:</p> <ul style="list-style-type: none"> • Bidder's capacity to perform the services as stated; • Areas in which Bidder did well and areas in which bidder could have improved (if applicable); • How well did/ does Bidder do around: <ul style="list-style-type: none"> ○ Ability to track and report outcomes; ○ Ability to hire, train, support, and retain staff; ○ Providing services in jail/s; ○ Provision of SUD treatment services; ○ Communication and responsiveness; ○ Reporting and invoicing; ○ Meeting program or contract deliverables. • References' overall satisfaction with Bidder; • References' comfort with recommending the Bidder to Alameda County; and • Any other information that would assist in Alameda County's work with the Bidder. 	5

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
3. LETTER OF TRANSMITTAL/ EXECUTIVE SUMMARY	Reviewed for completeness	Complete/Incomplete	Pass/Fail
4. BIDDER MINIMUM QUALIFICATIONS	<ul style="list-style-type: none"> Have at least three years of experience providing jail based services; and Have at least three years of experience providing SUD services to adults and/or young adults in the past five years. 	Meets/Does Not Meet Minimum Qualification	Pass/ Fail
5. BIDDER EXPERIENCE, ABILITY AND PLAN	a. The Evaluation Panel will read and assign a score based on how detailed and specific is the Bidder's response to the following questions which will become the total score under the <i>Understanding of the Priority Population Needs.</i>		(17) Section Subtotal
	i. Understanding of the Priority Population	How well does Bidder demonstrate understanding of the priority population including: <ul style="list-style-type: none"> Strengths and protective factors; Risk factors and barriers; Criminal factors and different reasons for incarceration; Bio-psychosocial needs; and Challenges with accessing and engaging in services. 	8
	ii. Experience with Priority Population	How well does Bidder demonstrate experience working with the priority population including: <ul style="list-style-type: none"> How well does Bidder demonstrate experience providing services in jails and to the priority population? How well does Bidder demonstrate experience working with individuals with complex bio-psychosocial, medical, and SUD treatment needs? 	9

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
		<ul style="list-style-type: none"> • How well does Bidder demonstrate successful strategies to address barriers faced by clients? How successful were these strategies? • How well does Bidder demonstrate experience and previous success in engaging incarcerated individuals in services? How well does Bidder describe their experience in supporting individuals with care transitions, as well as identifying and linking them with services? 	
	<p>b. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to the following questions which will become the total score under the <i>Service Delivery Approach.</i></p>		<p>(17) Section Subtotal</p>
	<p>i. Service Delivery to Clients</p>	<p>How well-matched is Bidder's plan to provide services, including:</p> <ul style="list-style-type: none"> • How realistic and appropriate is Bidder's plan to conduct ASAM assessments? How well does Bidder incorporate the BASIC intake for all clients? • How well does Bidder demonstrate how they will use assessment and intake to develop individualized treatment plans for clients? • How well does Bidder describe their plan to provide group counseling, individual counseling, and case management services to clients regularly? How well does Bidder demonstrate how they will engage clients in services? • How well does Bidder demonstrate how they will create a healing and welcoming environment responsive to client needs? • How appropriate are Bidder's proposed EBPs, promising practices, and curricula that address criminogenic needs and risk factors? 	<p>9</p>

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
	ii. Client Discharge	<p>How well-matched is Bidder's plan to provide services, including:</p> <ul style="list-style-type: none"> • How appropriate is Bidder's plan to support clients with discharge planning? How well does Bidder support clients with care transitions and identifying and linking to appropriate resources? How appropriate are Bidder's identified resources? • How well does Bidder describe how they will support clients in successfully linking with services post release? 	8
	c. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under the <i>Planned Staffing and Organizational Capacity.</i>		(16) Section subtotal
	i. Planned Staffing Structure	<p>How well-matched is Bidder's staffing plan, including:</p> <ul style="list-style-type: none"> • How appropriate is proposed plan for program staffing including staff positions, language capacity, roles, responsibilities, and supervision structure? • How well does Bidder identify tasks necessary to provide program services? How well does Bidder describe how tasks will be assigned to staff? • How well matched is Bidder's plan for hiring, training, supervising, and retaining staff? How well do staff reflect the priority population and language profiles? • How appropriate is Bidder's plan for supervision and oversight of proposed program components? 	8
	ii. Capacity and Organizational Infrastructure	How well does Bidder describe its organizational infrastructure, and how well-matched to the proposed services is this infrastructure, including:	8

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
		<ul style="list-style-type: none"> • How well does Bidder describe how program services will be integrated into Bidder’s existing organizational structure and services? • How well does Bidder demonstrate experience obtaining clearance for staff to provide services in jails or prisons? • How well does Bidder demonstrate capacity to support staff working at SRJ? • How well does Bidder demonstrate capacity to provide comprehensive, coordinated services? • How well does Bidder demonstrate experience and/or capacity to utilize electronic information management and claiming systems? 	
	<p>d. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder’s response to the following questions which will become the total score under <i>Forming Partnerships and Collaboration.</i></p>		(7)
	<p>i. Forming Partnerships and Collaboration</p>	<ul style="list-style-type: none"> • How well does Bidder demonstrate strategies to collaboration and partner with ACBH, AFBH, Alameda County Sherriff’s Department, Wellpath, AC Care Connect network of housing supports and other care transition services, CBOs, medical providers, mental health providers, and SUD treatment providers and services? • How well does Bidder demonstrate existing or proposed partnerships to support formerly incarcerated adults in housing services, benefits enrollment, and support services? • How well does Bidder demonstrate how existing program partnerships and collaborations will support services? 	7

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
	e. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to the following questions which will become the total score under <i>Tracking Data and Outcomes.</i>		(8)
	i. Track Data and Outcomes	<ul style="list-style-type: none"> • How well does Bidder demonstrate experience with data collection, tracking, and reporting including data tracking tools, systems, and/or EHR? • How well does Bidder describe their plan for monitoring program measures and outcomes, including tracking ASAM level of care determination, treatment plan, client attendance, and client progress? • How appropriate is Bidder's plan to track clients released from SRJ receiving SUD treatment services in the community? 	8
6. IMPLEMENTATION PLAN AND MITIGATION OF RISKS AND BARRIERS		The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to the following questions which will become the total score under Implementation Plan and Schedule.	(10)
	i. Implementation Plan	<ul style="list-style-type: none"> • How detailed and specific is Bidder's response? • How realistically does Bidder account for timeline to complete the following milestones: <ul style="list-style-type: none"> ○ Staff hiring; ○ Staff start background and clearance process; and ○ Deliver SUD treatment services at SRJ. 	5
	ii. Identification and Strategies for Mitigation of Risk and Barriers	<ul style="list-style-type: none"> • How detailed and specific is Bidder's response? • How thorough, thoughtful, and realistic is Bidder's identification of challenges and barrier mitigation strategies? • How well does Bidder assess barriers? • How creative and solution-oriented are Bidder's strategies? 	5

RFP SECTION	EVALUATION METHOD	EVALUATION CRITERIA	WEIGHT
7. BUDGET		The Evaluation Panel will review the Exhibit B-1 Budget Workbook and the Budget Narrative and assign a score based on how Bidder's proposed program budget aligns with the requirements of the RFP which will become the total score under the Cost. The Cost-Coefficient is scored by applying the standard County formula.	(10)
	i. Cost Co-Efficient	<ul style="list-style-type: none"> • Low bid divided by low bid x 5 x weight = points <i>For example:</i> $\\$100,000 / \\$100,000 = 1 \times 5 \times 5 = 25 \text{ points}$ • Low bid divided by second lowest bid x 5 x weight = points • Low bid divided by third lowest bid x 5 x weight = points • Low bid divided by fourth lowest bid x 5 x weight = points 	2
	ii. Budget iii. Budget Narrative	<ul style="list-style-type: none"> • How well-matched is Bidder's budget to the proposed program? • How well does the budget capture all activities and staff proposed in the Budget? • How well does Bidder allocate staff and resources? • How appropriate are the staffing and other costs? • How much value does the proposal add considering the cost of the program, expected outcomes and the number of clients served? • How well does the narrative detail how Bidder arrived at particular calculations? • How well does Bidder "show the work"? 	8
ORAL INTERVIEW, IF APPLICABLE	Criteria are created with the CSC/Evaluation Panel.		10
PREFERENCE POINTS, IF APPLICABLE	SLEB	Five Percent (5%)	
	Local (not SLEB certified)	Five Percent (5%)	

H. CONTRACT EVALUATION AND ASSESSMENT

During the initial sixty (60) day period of any contract, which may be awarded to a successful Bidder (“Contractor”), the CSC and/or other persons designated by the County may meet with the Contractor to evaluate the performance and to identify any issues or potential problems.

The County reserves the right to determine, in its sole discretion, (a) whether Contractor has complied with all terms of this RFP and (b) whether any problems or potential problems are evidenced which make it unlikely (even with possible modifications) that the proposed program and services will meet the County requirements. If, as a result of such determination the County concludes that it is not satisfied with Contractor, Contractors’ performance under any awarded contract as contracted for therein, the Contractor shall be notified of contract termination effective forty-five (45) days following notice. The County shall have the right to invite the next highest ranked Bidder to enter into a contract.

The County also reserves the right to re-bid these programs if it is determined to be in its best interest to do so.

I. AWARD

1. Proposals evaluated by the CSC/Evaluation Panel shall be ranked in accordance with the RFP section II.G. of this RFP.
2. The CSC shall recommend award of each contract to the Bidder who, in its opinion, has submitted the proposal that best conforms to the RFP and best serves the overall interests of the County and attains the highest overall point score. Award may not necessarily be recommended or made to the Bidder with the lowest price.
3. The County reserves the right to reject any or all proposals that materially differ from any terms contained in this RFP or from any Exhibits attached hereto, to waive informalities and minor irregularities in responses received, and to provide an opportunity for Bidders to correct minor and immaterial errors contained in their submissions. The decision as to what constitutes a minor irregularity shall be made solely at the discretion of the County.
4. Any proposal that contains false or misleading information may be disqualified by the County.
5. The County reserves the right to award to a single or multiple Contractors.
6. The County has the right to decline to award a contract in whole or any part thereof for any reason.
7. BOS approval to award a contract is required.

8. A contract must be negotiated, finalized, and signed by the intended awardee prior to BOS approval.
9. Final terms and conditions shall be negotiated with the Bidder recommended for award. The successful Bidder may request a copy of the Master Agreement template from the ACBH RFP contact. The template contains the agreement boilerplate language only.
10. The RFP specifications, terms, conditions, Exhibits, Addenda and Bidder's proposal, may be incorporated into and made a part of any contract that may be awarded as a result of this RFP.

J. PRICING

Federal and State minimum wage laws apply. The County has no requirements for living wages. The County is not imposing any additional requirements regarding wages.

K. INVOICING

1. Contractor shall invoice the requesting department, unless otherwise advised, upon satisfactory receipt of product and/or performance of services.
2. Payment will be made within thirty days following receipt of invoice and upon complete satisfactory receipt of product and performance of services.
3. County shall notify Contractor of any adjustments required to invoice.
4. Invoices shall contain County purchase order (PO) number, invoice number, remit to address and itemized products and/or services description and price as quoted and shall be accompanied by acceptable proof of delivery.
5. Contractor shall utilize standardized invoice upon request.
6. Invoices shall only be issued by the Contractor who is awarded a contract.
7. Payments will be issued to and invoices must be received from the same Contractor whose name is specified on the POs.

L. NOTICE OF INTENT TO AWARD

At the conclusion of the proposal evaluation process ("Evaluation Process"), all Bidders will be notified in writing by e-mail, fax, or US Postal Services mail of the contract award recommendation, if any, by ACBH. The document providing this notification is the Notice of Intent to Award.

The Notice of Intent to Award shall provide the following information:

- The name of the Bidder being recommended for contract award; and
- The names of all other Bidders that submitted proposals.

At the conclusion of the RFP response evaluation process and negotiations, debriefings for unsuccessful Bidders will be scheduled and provided upon written request and will be restricted to discussion of the unsuccessful Bidder's proposal.

- Under no circumstances shall any discussion be conducted with regard to contract negotiations with the recommended /successful Bidder.
- Debriefing may include review of the recommended/ successful Bidder's proposal/s with redactions as appropriate.

All submitted proposals shall be made available upon request no later than five (5) calendar days before approval of the award and contract is scheduled to be heard by the Board of Supervisors.

M. TERM/TERMINATION/RENEWAL

The term of the contract, which may be awarded pursuant to this RFP, will be one year and may be renewed thereafter, contingent on the availability of funds, Contractor's performance, continued prioritization of the activities and priority populations, as defined and determined by ACBH.

III. APPENDICES

A. GLOSSARY & ACRONYM LIST

Agreement	The formal contract between ACBHCS and Contractor.
ACBH	Alameda County Behavioral Health Care Services, a department of the Alameda County Health Care Services Agency.
AFBH	Adult Forensic Behavioral Health
ASAM	American Society of Addiction Medicine
BASIC	BASIC intake is based on principles of whole-person, culturally affirming, consumer centered care.
Bid	A Bidders' response to this Request; used interchangeably with proposal.
Bidder	The specific person or entity responding to this RFP.
Board	Shall refer to the County of Alameda Board of Supervisors.
Client	The recipient of services; used interchangeably with beneficiary and consumer.
CBT	Cognitive Behavioral Therapy
Consumer	The recipient of services; used interchangeable with beneficiary and consumer.
Community-Based Organization (CBO)	A non-governmental organization that provides direct services to beneficiaries.
Contractor	When capitalized, shall refer to selected Bidder that is awarded a contract.
County	When capitalized, shall refer to the County of Alameda.
Criminogenic	A situation, system, or place likely to cause criminal behavior.
CSC	County Selection Committee or Evaluation Panel
DHCS	Department of Health Care Services
Federal	Refers to United States Federal Government, its departments and/or agencies.
Full Time Equivalent (FTE)	A budgetary term used to describe the number of total hours worked divided by the maximum number of compensable hours in a full-time schedule as defined by law. For example, if the normal schedule for a staff person is 40 hours per week (40*52 weeks–4 weeks for vacation=1,920). Someone working 1,440 hours during the year represents 1,440/1,920=.75 FTE.
EBP	Evidence Based Practice
EHR	Electronic Health Records
Licensed Practitioner of the Healing Arts (LPHA)	Licensed clinical staff (MD, PhD, MFT, LCSW) and staff who are registered with the California Board of Behavioral Sciences, usually registered MFT/ASW interns; psychologists who are waived by the State to provide services; and Master's level clinical nurse

RFP #19-08 Santa Rita Jail Substance Use Disorder Treatment Pilot

	specialists who have national or state license to practice independently.
MAT	Medication Assisted Treatment
Mental Health Services	Individual, family or group services or interventions that are designed to provide information on mental health issues, reduction of mental disability and/or improvement or maintenance of functioning.
Motivational Interviewing (MI)	Client centered, empathetic, but directive counseling strategy designed to explore and reduce a person's ambivalence toward treatment. This approach frequently includes other problem solving or solution-focused strategies that build on clients past successes.
Outcomes	The extent of change in attitudes, values, behaviors, or conditions between baseline measurement and subsequent points of measurement. Depending on the nature of the intervention and the theory of change guiding it, changes can be short, intermediate, and longer-term outcomes.
Promising Practice	An intervention, program, service, strategy, or policy that shows potential or promise for developing into a best practice.
Proposal	Shall mean Bidder's response to this RFP; used interchangeably with bid.
Qualified	Competent by training and experience to be in compliance with specified requirements.
Request for Proposal (RFP)	Shall mean this document, which is the County of Alameda's request for proposal to provide the services being solicited herein; also referred herein as RFP.
Response	Shall refer to Bidder's proposal submitted in reply to RFP.
Seeking Safety	An evidence-based, present-focused counseling method to help people attain safety from trauma and/or substance abuse. It directly addresses both trauma and addiction, but without requiring clients to delve into the trauma narrative (the detailed account of disturbing trauma memories), thus making it relevant to a very broad range of clients and easy to implement.
SLEB	Small Local Emerging Business
SRJ	Santa Rita Jail
State	Refers to State of California, its departments and/or agencies.
SUD	Substance Use Disorder
Wellpath	Alameda County Sheriff Office's contracted medical provider in Santa Rita Jail.

B. DESCRIPTION OF SERVICE MODALITIES

Following is a summary of ASAM level of care treatment service components and requirements excerpted from The ASAM Criteria, Treatment Criteria for Addictive, Substance-Related and Co-Occurring Conditions (American Society of Addictive Medicine, Third Edition, 2013). Bidders must demonstrate capacity to meet all ASAM level of care service components and requirements in their proposals and all Drug Medi-Cal certification requirements. Where DMC and ASAM Criteria requirements differ, DMC certification requirements take precedence.

1. Outpatient and Intensive Outpatient Services

a. Experience and Service Delivery Approach

BHCS is seeking proposal from qualified providers for Outpatient Services/ASAM Level 1.0 and Intensive Outpatient Services/ASAM Level 2.1. Bidders must include both levels of services (Level 1.0/Outpatient and Level 2.1/Intensive Outpatient Services) in their bid. This requirement applies to Bidders submitting bids for either adult/older adult and/or adolescent outpatient services. BHCS does not intend to award separate contracts for ASAM Level 1.0 (Outpatient) and Level 2.1 (Intensive Outpatient) Services.

b. Level 1.0/Outpatient Services Requirements

Level 1.0/Outpatient Services are benchmarked at the lower end of the ASAM treatment continuum and include organized outpatient treatment services which can be delivered in a variety of settings such as addiction programs, behavioral health homes and clinics, and schools, and other field-based sites. Services are provided less than 9 hours per week for adults and less than 6 hours per week for adolescents.

In Level 1.0 programs, a multi-disciplinary team provides services. Members of the team could include addiction, mental health treatment, recovery support specialists, and general health care personnel, including addiction credentialed physicians. The team provides professionally directed screening, evaluation, treatment and ongoing recovery and disease management services. Please refer to DMC-ODS staff service categories for more information. http://www.dhcs.ca.gov/provgovpart/Documents/DMC-ODS_Waiver/ODS_Staffing_Grid_032017.pdf

Like all ASAM Levels of Care, Level 1.0 services are tailored to each client's level of clinical severity and function and are designed to help the client achieve changes in his or her alcohol and/or other drug use or addictive behaviors. Treatment addresses major lifestyle, attitudinal, and behavioral issues that have the potential to undermine the goals of treatment or impair the client's ability to cope with major life tasks without the addictive use of alcohol and/or other drugs.

These services provide greater access to care for individuals who have a substance use disorder as diagnosed in the DSM V. This may include individuals with co-occurring substance use and physical and mental health conditions, individuals not interested in recovery that are mandated to treatment, and individuals in early stages of readiness to change. Level 1.0/Outpatient Services also provide access to needed care for clients in early recovery that need education about addiction and person-centered treatment, as well as clients in ongoing recovery who need monitoring and continuing disease management. Some characteristics of

clients in Level 1.0 include those who are able to complete professionally directed addiction and/or mental health treatment, those who are stepping down from a more intensive level of care, those who are in early stages of change and not yet ready to commit to full recovery, and those who have achieved stability in recovery.

Level 1.0/Outpatient Services Support Requirements

Level 1.0/Outpatient Services programs include the following supports:

1. Linkage to and coordination with medical, psychiatric, psychological services; medical and psychiatric consultation is available by telephone or in person within a timeframe appropriate to the severity and urgency of the consultation requested;
2. Laboratory and toxicology collection services available on-site or through closely coordinated referral;
3. Directly affiliated with or closely coordinated referral to more intensive levels of care and medication management; and
4. Emergency services available by telephone 24 hours a day/7 days a week.

Level 1.0/Outpatient Services Required Therapies

Level 1.0/Outpatient Services involve skilled treatment services which are provided in an amount, frequency and intensity appropriate to a client's needs, and include at a minimum:

1. Intake;
2. Individual and group counseling;
3. Patient education
4. Family therapy;
5. Family contact (Adolescent Program Only)
6. Psycho educational groups;
7. Treatment group
8. Multi-family group (Adolescent Program Only)
9. Medication services;
10. Collateral services;
11. Screening/Engagement (Adolescent Program Only)
12. Crisis intervention;
13. Treatment planning and update;
14. Discharge services;
15. Case management services; and
16. Recovery Services

Level 1.0/Outpatient Services Assessment/Treatment Plan Review Requirements

For Level 1.0 programs, the assessment and treatment plan review must include:

1. Individualized, comprehensive bio psychosocial assessments of a comprehensive substance use and addictive behaviors history reviewed by the Medical Director or LPHA, and if determined needed by a client's medical condition, a referral for a physical examination within a reasonable amount of time;
2. Individualized treatment plans developed in partnership with the client that includes: all challenges identified during the intake and assessment, area(s) of difficulty (Alcohol and/or drugs; family & social skills; legal; employment & support; recovery environment; and emotional, behavioral and/or cognitive conditions & complications.

Treatment Plans must identify attainable goals of the client that focuses upon their personal vision of recovery, wellness, and the life they envision for themselves and includes strengths. Goals should preferably be observable, measurable, and with an expected timeframe for accomplishment. Challenges from reaching the goals may include specific symptoms and impairments of the approved diagnosis and must indicate Level of Difficulty: Mild, Moderate, or Severe. If a challenge is not going to be addressed during the treatment plan period, provide the reason why and indicate the challenge as deferred.

3. Monitoring, including toxicology testing; and
4. A review of a client's most recent psychiatric history and a mental status examination performed within a reasonable timeframe for clients with co-occurring mental disorders, conducted by an LPHA, or Medical Director.

Level 1.0/Outpatient Services Staffing Requirements

Level 1.0/Outpatient Services program are staffed by appropriately credentialed and/or licensed treatment professionals who assess and treat substance-related, mental, and addictive disorders.

Professional staff are experienced in gathering and interpreting information regarding a client's bio psychosocial needs and are knowledgeable about the biophysical dimensions of alcohol and other drug and addictive disorders including how to assess a client's readiness for change. Professional staff also are capable of monitoring stabilized mental health challenges a client may have and recognizing instability in clients with co-occurring mental health conditions.

Drug Medi-Cal certified outpatient sites must comply with DMC and other staffing requirements including but not limited to:

1. Appropriately credentialed and/or licensed treatment professionals including addiction- credentialed physicians, counselors, psychologists, social workers, and others to assess and treat substance-related, mental, and addictive disorders;
2. Recovery Support Specialists provided by a LPHA, SUD Counselor, or Peers (for substance abuse assistance services only). Peer support specialists with lived experience in substance use treatment can provide peer-to-peer services and relapse prevention as a form of substance abuse assistance, a component of recovery support services. Clients may access these services, when medically necessary, after completing their course of treatment.
3. Credentialed LPHA professionals, working within their scope of practice to assess, manage, and monitor client mental health disorders for clients with co-occurring disorders preferably on-site or via closely coordinated referrals.

c. Level 2.1/Intensive Outpatient Services (IOT) Requirements

Intensive Outpatient Services (IOT) offer a higher intensity of outpatient services with the goal of stepping clients down to Level 1/Outpatient Services or discharge. Level 2.1/IOT programs offer services during the day, after school, in the evening, and/or on weekends.

Generally, 9-19 hours of structured programming per week is provided to adults, and 6-19 hours a week for adolescents. Although programming consists primarily of counseling and education about addiction-related and mental health problems, providers must demonstrate capacity to provide all required Level 2.1/IOT service components.

Client psychiatric and medical service needs are provided through consultation and closely coordinated referrals if a client is stable and requires only maintenance monitoring. Bidders must demonstrate on-site capacity or formal partnerships with mental health and healthcare providers to meet the needs of clients with co-occurring mental disorders.

Level 2.1/IOT Support Requirements

Level 2.1/IOT programs include all of the following:

1. Linkage to and coordination with medical, psychiatric, psychological services; medical and psychiatric consultation is available by telephone or in person within 72 hours;
2. Laboratory and toxicology collection services available on-site or through closely coordinated referral;
3. Emergency services that are available by telephone 24 hours a day/7 days a week when the treatment program is not in session;
4. Direct affiliation with or close coordination through referral to more and less intensive levels of care and supportive housing services; and
5. Ongoing psychiatric services that are appropriate to a client's mental health condition are available by telephone or on-site or closely coordinated off-site.

Level 2.1/IOT Required Therapies

Level 2.1/IOT programs must provide the following therapies:

1. A minimum of 9 hours per week for adults and 6 hours per week for adolescents of skilled treatment services which may include individual and group counseling, medication management, family therapy, educational groups, occupational and recreational therapy, and other therapies provided in amounts, frequencies, and intensities appropriate to the objectives of a client's treatment plan;
2. Family therapy which involves family members, guardians, or significant others in the assessment, treatment and continuing care of the client; and
3. A planned format of evidence-based therapies/practices delivered on an individual or group basis and adapted to the client's developmental stage and comprehension level.

Level 2.1/IOT Assessment/Treatment Plan Review Requirements

For Level 2.1/IOT programs, client assessment and treatment plan reviews include:

1. Individualized, comprehensive bio psychosocial assessment of a comprehensive substance use and addictive behaviors history reviewed by a physician and if determined needed by a client's medical condition, a physical examination within a reasonable amount of time;

2. An individualized treatment plan developed in partnership with the client that includes challenges, needs, strengths, skills, priority formulation and articulation of short-term, measurable treatment goals (including the client's treatment goals), preferences and activities designed to achieve those goals;
3. Monitoring, including biomarkers and toxicology testing; and
4. A review of a client's most recent psychiatric history and a mental status examination performed within a reasonable timeframe for clients with co-occurring mental disorders, conducted by an LPHA, or Medical Director

Level 2.1/IOT Staffing Requirements

Level 2.1/IOT programs are staffed by an inter-disciplinary team of appropriately credentialed addiction treatment professionals and can include counselors, psychologists, social workers, and addiction-credentialed physicians who assess and treat substance use and other addictive disorders. Physicians treating clients in Level 2.1/IOT should have specialty training and experience in addiction medicine or addiction psychiatry, and if treating adolescents, experience with adolescent medicine.

All program staff should have access to and be able to interpret information regarding a client's bio psychosocial needs. Some staff should have sufficient cross-training to understand the signs and symptoms of mental disorders and understand and be able to explain the uses of psychotropic medications and their interactions with substance use and other addictive disorders.

D. ASAM ASSESSMENT

ALOC Initial and ALOC Review – Clinicians Gateway SUD

Service #: New Title: ALOC Initial		Service date: 12/05/2018
Client: Number: Unknown	Last Name: <input type="text"/>	First Name: <input type="text"/>
Procedures: 882 SUD TRACKING ALOC	Util. review date:	Plan due date:
Service Location: Office	Med. Compliant: N/A	Side Effects: N/A
Emergency: <input type="checkbox"/>	Pregnant?: <input type="checkbox"/>	
Billing time		
Primary Clinician: <input type="text"/>	Provider: 999CGS - CLINICIAN GATEWAY TEST SUD AD	Clinician Time: 00:00
Add Additional Clinicians		

ALOC Initial

DIMENSION 1. Acute Intoxication and/or Withdrawal Potential

(a) Does the Client have a past history of serious withdrawal, life-threatening symptoms or seizures during withdrawal? e.g., need for IV therapy; hospital for seizure control; psychosis with DT's; medication management with close nurse monitoring and medical management?

No Yes

(b) Does the Client currently have severe, life-threatening and/or similar withdrawal symptoms?

No Yes

(c) Does the Client currently have Opioid Withdrawal symptoms? (Ex. Restlessness, chills, sweats, runny nose, pain, stomach cramps)

No Yes *if yes: consider NTP/OTP level of care*

Select one: No Risk/Stable (0) Mild (1) Moderate (2) Significant (3) Severe (4)

DIMENSION 2. Biomedical Conditions/Complications

(a) Does the client have any current severe physical health problems? e.g., bleeding from mouth/rectum in past 24 hours; recent, unstable hypertension; severe pain in chest, abdomen, head; significant problems in balance, gait, sensory/motor abilities not related to intoxication.

No Yes

(b) Has the client had a history or recent episode of seizures/convulsions; diagnosed with TB, emphysema, hepatitis C, heart condition?

No Yes

Select one: No Risk/Stable (0) Mild (1) Moderate (2) Significant (3) Severe (4)

DIMENSION 3. Emotional/Behavioral/Cognitive Conditions/Complications

(a) Client in imminent danger of harming self or someone else? e.g., SI+ with intent, plan, means to succeed; HI+ or violent ideation, impulses, uncertainty about ability to control impulses, with means to act.

No Yes

(b) Client unable to function in ADL's, care for self with imminent, dangerous consequences? e.g., unable to bathe, feed, care for self due to psychosis, organicity or uncontrolled intoxication with threat of imminent DTS/O as regards death or severe injury.

No Yes

(c) Client will benefit from a co-occurring capable program as opposed to a co-occurring enhanced program?

No Yes

Select one: No Risk/Stable (0) Mild (1) Moderate (2) Significant (3) Severe (4)

DIMENSION 4. Readiness to Change

(a) Does the client appear to need SUD treatment/recovery and/or mental health treatment, but is ambivalent or feels it's unnecessary? e.g., severe addiction, but client feels controlled use is still OK; psychotic, but blames a conspiracy.

No Yes

(b) Client has been coerced or mandated to have assessment and/or treatment by Mental Health Court or CJ system, health or social services, work/school, or family/significant other?

No Yes

(c) Client is in which Stage of Change?

Precontemplation Contemplation Preparation Action Maintenance

Select one: No Risk/Stable (0) Mild (1) Moderate (2) Significant (3) Severe (4)

DIMENSION 5. Relapse/Continued Use/Continued Problem Potential

(a) Does the client understand relapse but needs structure to maintain therapeutic gains?

No Yes

(b) Client is unwilling and/or ambivalent to create a continued use prevention plan?

No Yes

(c) Is the client likely to continue to use or have active, acute symptoms in an imminently dangerous manner, without immediate containment?

No Yes

Select one: No Risk/Stable (0) Mild (1) Moderate (2) Significant (3) Severe (4)

DIMENSION 6. Recovery Environment

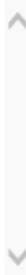
(a) Are there any dangerous family, significant others, living/work/school situations threatening the client's safety, immediate well-being, and/or sobriety? e.g., living with a drug dealer; someone with a Substance Use Disorder or using drugs or alcohol; client is experiencing abuse by a partner or significant other; homeless in freezing temperatures.

- No Yes

(b) How would the Client describe their relationships?

- Actively Toxic Not Supportive Marginally Supportive Moderately Supportive Very Supportive






Select one: No Risk/Stable (0) Mild (1) Moderate (2) Significant (3) Severe (4)

ASAM Clinical Placement Scoring Summary							
ASAM Dimensions: 1 - Acute Intoxication and/or Withdrawal Potential; 2 - Biomedical Conditions and Complications; 3 - Emotional/Behavioral/Cognitive Conditions and Complications; 4 - Readiness to Change (including Desire to Change); 5 - Relapse/Continued Use/Continued Problem Potential; 6 - Recovery Environment							
Risk Ratings	Intensity of Service Need	Dimensions					
		1	2	3	4	5	6
(0) No Risk or Stable – Current risk absent. Any acute or chronic problem mostly stabilized.	No immediate services needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(1) Mild – Minimal, current difficulty or impairment. Minimal or mild signs and symptoms. Any acute or chronic problems soon able to be stabilized and functioning restored with minimal difficulty.	Low intensity of services needed for this dimension. Treatment strategies usually able to be delivered in outpatient settings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(2) Moderate Moderate difficulty or impairment. Moderate signs and symptoms. Some difficulty coping or understanding, but able to function with clinical and other support services and assistance.	Moderate intensity of services, skills training or supports needed for this level of risk. Treatment strategies may require intensive levels of outpatient care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(3) Significant – Serious difficulties or impairment. Substantial difficulty coping or understanding and being able to function even with clinical support.	Moderately high intensity of services, skills training, or supports needed. May be in danger or near imminent danger.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(4) Severe – Severe difficulty or impairment. Serious, gross or persistent signs and symptoms. Very poor ability to tolerate and cope with problems. Is in imminent danger.	High intensity of services, skills training, or supports needed. More immediate, urgent services may require inpatient or residential settings; or closely monitored case management services and a frequency greater than daily.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I. Key Findings Supporting Placement Decision:							
							

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Indicated ASAM Level of Care to which referred	
Indicated ASAM LOC:	Select One
Additional Indicated ASAM LOC:	Select One
Additional Indicated ASAM LOC:	Select One
Actual ASAM Level of Care to which referred	
Portals: Select the level of care and program name of referral	
Providers: For referrals to a different level of care, please refer client to SUD Helpline for a level of care determination 1-844-682-7215. For referrals to a different level of residential treatment within the same program, please indicate which level of care and which program. For clients staying in the same level of care, please indicate which level of care, and which program the client is staying at.	
	Select One
Contact Person:	First Offered Appointment: [] [] Intake Appointment Date: [] [] Time: []
	Select One
Contact Person:	First Offered Appointment: [] [] Intake Appointment Date: [] [] Time: []
Reason for ASAM LOC Difference	
If Actual LOC to which referred differed from the indicated ASAM LOC, choose the reason for the difference.	
	Select One
Reason for Delay	
Availability to admit into care: <input type="radio"/> Immediately <input type="radio"/> Delayed	
If referral is being made but admission is expected to be DELAYED, choose the reason.	
	Select One

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Non ASAM Level of Care SUD Services to which referred			
Portals: Select the level of care and program name of referral			
Providers: For referrals to a different level of care, please refer client to SUD Helpline for a level of care determination 1-844-682-7215  . For referrals to a different level of residential treatment within the same program, please indicate which level of care and which program. For clients staying in the same level of care, please indicate which level of care, and which program the client is staying at.			
<input type="text" value="Select One"/>			
Contact Person: <input type="text"/>		First Offered Appointment: <input type="text"/> 	
Intake Appointment Date: <input type="text"/> 		Time: <input type="text"/>	
<input type="text" value="Select One"/>			
Contact Person: <input type="text"/>		First Offered Appointment: <input type="text"/> 	
Intake Appointment Date: <input type="text"/> 		Time: <input type="text"/>	

E. SANTA RITA JAIL WALK-THROUGH CLEARANCE FORM

ALAMEDA COUNTY SHERIFF'S OFFICE

SECURITY SITE CLEARANCE

PLEASE TYPE OR PRINT Email Address: _____

LAST NAME: _____ FIRST: _____ MI: _____ DOB: _____
ADDRESS: _____ CITY: _____ APT: _____ ZIP: _____
RESIDENCE PHONE: _____ BUSINESS PHONE: _____ RACE: _____ SEX: _____
AGE: _____ HEIGHT: _____ WEIGHT: _____ EYES: _____ HAIR: _____
DRIVER'S LICENSE #: _____ STATE: _____ SSN: _____
CONTRACTOR EMPLOYER: _____ JOB TITLE: _____ SUPV: _____
REASON FOR VISIT: _____ DATE OF VISIT: _____

START DATE: _____ PERMANENT POSITION: _____ TEMPORARY POSITION: _____

PERSON TO NOTIFY IN CASE OF _____ PHONE: _____

EMERGENCY:
DO YOU CURRENTLY KNOW ANYONE IN CUSTODY IN THE ALAMEDA COUNTY JAIL SYSTEM? YES [] NO []
(HAVE YOU EVER BEEN ARRESTED BY ANY LAW ENFORCEMENT AGENCIES? YES [] NO []
HAVE YOU EVER BEEN CHARGED OR CONVICTED ANY TYPE OF CRIMINAL OFFENSE? YES [] NO []
HAVE YOU EVER ENGAGED IN ANY TYPE OF SEXUAL ABUSE IN ANY CONFINEMENT SETTING? YES [] NO []
HAVE YOU EVER BEEN CONVICTED OF ANY SEX CRIME? YES [] NO []
HAVE YOU EVER BEEN CIVILLY OR ADMINISTRATIVELY ADJUDICATED TO HAVE ENGAGED IN SEXUAL ABUSE IN ANY TYPE OF CONFINEMENT FACILITY? YES [] NO []
HAVE YOU EVER BEEN ACCUSED OF SEXUAL ABUSE/HARRASSMENT YES [] NO []

FAILING TO LIST AN ARREST OR CONVICTION WOULD BE BASIS FOR DENIAL.

IF YOU HAVE BEEN ARRESTED OR CHARGED WITH A CRIME EXPLAIN BELOW

DATE CHARGE ARRESTING AGENCY DISPOSITION

(IF MORE SPACE IS REQUIRED USE AN ADDITIONAL SHEET OF PAPER)

I UNDERSTAND THAT I AM SUBJECT TO AND GIVE MY CONSENT TO BE SEARCHED, INCLUDING MY PERSON, AFFECTS AND VEHICLE AT ALL TIMES THAT I AM ON JAIL PROPERTY.

FURTHERMORE, IF ANYONE I KNOW COMES INTO CUSTODY WITHIN THE ALAMEDA COUNTY JAIL SYSTEM, I WILL NOTIFY THE CLASSIFICATION UNIT SERGEANT IN WRITING WITHIN 24 HOURS.

THIS STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND ANY FALSE STATEMENT IS CAUSE FOR MY SITE CLEARANCE TO BE REVOKED.

APPLICANT SIGNATURE: _____ DATE: _____

(APPLICANT: KEEP A COPY OF THIS FORM FOR YOUR REFERENCE)

DMV: _____ REMARKS : _____
JPQN: _____ REMARKS : _____
JPPS: _____ REMARKS : _____
WPS: _____ REMARKS : _____
CII : _____ REMARKS : _____

CLEARANCE DEPUTY: _____ BADGE#: _____ DATE: _____

SUPERVISOR: _____ BADGE#: _____ DATE: _____

APPROVED [] DENIED [] COMMENTS: _____ GDJ

_____ SRJ _____ CRC _____ ID BADGE ISSUED AT DATE: _____

PLEASE SCAN AND SEND COMPLETED FORMS TO LIEUTENANT ROSS CLIPPINGER, RCLIPPINGER@ACGOV.ORG BY FRIDAY MAY 24, 2019.

F. BID SUBMISSION CHECKLIST**BID SUBMISSION CHECKLIST**

All of the documentation listed below is required to be submitted with the Bid Response Packet in order for a bid to be deemed complete. Bidders shall submit all documentation, in the order listed below and clearly label

1. Table of Contents

2. Bid Response (must not exceed the maximum page limit of 23) Bidder may use ACBH-issued Bid response Template in MS Word but is not required to, as long as Bid Response conforms with page maximum and is complete per this Bid Submission Checklist.

- Exhibit A: Bidder Information and Acceptance:**
Bidders must select one box under Item 10 of Exhibit A Bidder Information and Acceptance Form and must fill out and submit a **signed** page of Exhibit A.
- Exhibit D: Exceptions, Clarifications, Amendments:**
Indicate all of Bidder exceptions to the County's requirements, conditions and specifications as stated within this RFP. This shall include clarifications, exceptions and amendments, if any, to the RFP and associated Bid Documents, and shall be submitted with your bid response using the template in Exhibit A – Bid Response Packet. THE COUNTY IS UNDER NO OBLIGATION TO ACCEPT ANY EXCEPTIONS, AND SUCH EXCEPTIONS MAY BE A BASIS FOR BID DISQUALIFICATION.
- SLEB Partnering Information Sheet:**
Every Bidder must fill out and submit a signed SLEB Partnering Information Sheet in the Bid Template, indicating their SLEB certification status. If Bidder is not certified, the name, identification information, and goods/services to be provided by the named CERTIFIED SLEB partner(s) with whom the Bidder will subcontract to meet the County SLEB participation requirement must be stated. Any CERTIFIED SLEB subcontractor(s) named, the Exhibit must be signed by the CERTIFIED SLEB(s) according to the instructions. All named SLEB subcontractor(s) must be certified by the time of bid submittal.
- References:**
Bidders are to provide a list of three current and three former references. If unable to provide the stated number of references, include justification in your bid submission as a separate attachment. References must be satisfactory as deemed solely by County. References should have similar scope, volume and requirements to those outlined in these specifications, terms and conditions.
- Letter of Transmittal/Executive Summary:**
Bidders should use this document to provide a synopsis of the highlights and benefits of their bid.
- Bidder Minimum Qualifications:**
Bidders must demonstrate how they meet all of the criteria.
- Bidder Experience, Ability and Plan:**
Bidders must respond to all questions in this section of the narrative proposal.

- Implementation Schedule and Plan:**
Bidders must respond to all questions in this section of the narrative proposal.
- Budget Narrative:**
Budget narrative must match Exhibit B-1 Budget.
- Exhibit B-1: Budget:**
Bidders must complete all tabs in the budget workbook.
- Attachments:**
Bidders must submit all Attachments as part of their bid packet.
 - a) Attachment 1A: Organizational Chart
 - b) Attachment 1B: Program Chart

A complete Bid Response Packet must include:

- Original Proposal:**
One original hard copy of the proposal in a three-ring binder with original signatures. Original proposal is to be clearly marked on the cover.
- Copies of Proposal:**
Seven copies of the proposal. Copies must be unbound without a three-ring binder.
- Electronic copy of Proposal:**
Enclosed with the hardcopy of the proposal, include a USB flash drive clearly marked with the Bidder and RFP name and with the following saved on it:
 - An electronic copy of the proposal, saved with the Bidder's name;
 - An electronic copy of the completed Exhibit B-1 Program Budget, saved in MS Excel with the Bidder's name.

G. EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE

Bidder Information and Acceptance

1. The undersigned declares that the proposal documents, including, without limitation, the RFP, Addenda and Exhibits have been read and accepted.
2. The undersigned declares that he/she is authorized, offers, and agrees to furnish the articles and/or services specified in accordance with the RFP's specifications, terms & conditions.
3. The undersigned has reviewed the proposal documents and fully understands the requirements in this proposal including, but not limited to, the requirements under the County Provisions, and that each Bidder who is awarded a contract shall be, in fact, a prime contractor, not a subcontractor, to the County, and agrees that its proposal, if accepted by County, will be the basis for the Bidder to enter into a contract with County in accordance with the intent of the proposal.
4. The undersigned also agrees to follow the Bid Protests / Appeals Process.

Alameda County prides itself on the establishment of fair and competitive contracting procedures and the commitment made to follow those procedures. The following is provided in the event that Bidders wish to protest the proposal process or the recommendation to award a contract for these programs once the Notices of Intent to Award/Non-Award have been issued.

The following describes two separate processes: Bid Protests and Appeals. Bid Protests submitted prior to issuance of the Notices of Intent to Award/Non-Award shall not be accepted by the County.

Bid Protests from any Bidder related to this RFP must be submitted in writing to the ACBH Director located at 2000 Embarcadero Cove, Suite 400, Oakland, CA 94606 Fax: 510.567.8180, before 5:00 p.m. of the **fifth (5th)** business day **following the date of issuance of the Notice of Intent to Award/Non-Award, not the date it is received by the Bidder**. Any Bid Protest received after 5:00 p.m. shall be considered received as of the next business day.

- The Bid Protest must contain a complete statement of the reasons and facts for the protest.
- The Bid Protest shall refer to the specific portions of documents that form the basis for the protest.
- The Bid Protest shall include the name, address, email address, fax number and telephone number of the person representing the protesting party.
- ACBH shall transmit a copy of the Bid Protest to all Bidders as soon as possible after receipt of the protest.

Upon receipt of written Bid Protest, the ACBH Director, or designee shall review and evaluate the protest and issue a written decision. The ACBH Director, may, at his or her discretion, investigate the protest, obtain additional information, provide an opportunity to settle the protest by mutual agreement, and/or schedule a meeting(s) with the protesting Bidder and others (as determined appropriate by the ACBH Director) to discuss the Bid Protest. The decision on the proposal protest shall be issued at least ten (10) business days prior to the date the Board is considering the recommendation and award of contract.

The decision on the Bid Protest shall be communicated by e-mail, fax, or US Postal Service mail, and shall inform the Bidder whether or not the recommendation to the Board of Supervisors as stated in the Notice of Intent to Award is going to change. A copy of the decision shall be furnished to all Bidders affected by the decision. As used in this paragraph, a Bidder is affected by the decision on a Bid Protest if a decision on the Bid Protest could have resulted in the Bidder not being the recommended successful Bidder on the RFP.

RFP #19-08 Santa Rita Jail Substance Use Disorder Treatment Pilot

The decision of the ACBH Director on the Bid Protest may be appealed to the Auditor-Controller's Office of Contract Compliance & Reporting (OCCR) located at 1221 Oak St., Rm. 249, Oakland, CA 94612, Fax: 510.272.6502 unless the OCCR determines that it has a conflict of interest in which case an alternate will be identified to hear the appeal and all steps to be taken by OCCR will be performed by the alternate. The Bidder whose proposal is the subject of the Bid Protest, all Bidders affected by the ACBH Director's decision on the Bid Protest, and the protesting Bidder have the right to appeal if not satisfied with the ACBH Director's Bid Protest decision. **All Appeals to the Auditor-Controller's OCCR shall be in writing and submitted within five (5) business days following the issuance of the decision by the ACBH Director, not the date received by the Bidder.** Appeals received after 5:00 p.m. is considered received as of the next business day.

- The Appeal shall specify the Bid Protest decision being appealed and all the facts and circumstances relied upon in support of the Appeal.
- In reviewing Appeals, the OCCR shall not re-judge the proposals. The appeal to the OCCR shall be limited to review of the procurement process to determine if the contracting department materially erred in following the RFP or, where appropriate, County contracting policies or other laws and regulations.
- The Appeal to the OCCR also shall be limited to the grounds raised in the original Bid Protest and the decision by the ACBH Director. As such, a Bidder is prohibited from stating new grounds for a Bid Protest in its Appeal. The Auditor-Controller (OCCR) shall only review the materials and conclusions reached by the GSA-Office of Acquisition Policy or department designee, and will determine whether to uphold or overturn the protest decision.
- The Auditor's Office may overturn the results of a bid process for ethical violations by Procurement staff, County Selection Committee members, subject matter experts, or any other County staff managing or participating in the competitive bid process, regardless of timing or the contents of a bid protest.
- The decision of the Auditor-Controller's OCCR is the final step of the Appeal process. A copy of the decision of the Auditor-Controller's OCCR shall be furnished to the protestor, the Bidder whose proposal is the subject of the Bid protest, and all Bidders affected by the decision.

The County shall complete the Bid Protest/Appeal procedures set forth in this before a recommendation to award the contract is considered by the Board of Supervisors.

The procedures and time limits set forth in this section are mandatory and are each Bidder's sole and exclusive remedy in the event of Bid Protest. A Bidder's failure to timely complete both the Bid Protest and Appeal procedures shall be deemed a failure to exhaust administrative remedies. Failure to exhaust administrative remedies, or failure to comply otherwise with these procedures, shall constitute a waiver of any right to further pursue the Bid Protest, including filing a Government Code Claim or legal proceedings.

5. The undersigned agrees to the following terms, conditions, certifications, and requirements found on the County's website:
 - **Debarment / Suspension Policy:** <http://www.acgov.org/gsa/departments/purchasing/policy/debar.htm>
 - **Iran Contracting Act (ICA) of 2010:** <http://www.acgov.org/gsa/departments/purchasing/policy/ica.htm>
 - **General Environmental Requirements:** <http://www.acgov.org/gsa/departments/purchasing/policy/envIRON.htm>
 - **Small Local Emerging Business Program:** <http://acgov.org/auditor/sleb/overview.htm>
 - **First Source:** <http://www.acgov.org/auditor/sleb/sourceprogram.htm>
 - **Online Contract Compliance System:** <http://acgov.org/auditor/sleb/elation.htm>
 - **General Requirements:** <http://www.acgov.org/gsa/departments/purchasing/policy/genreqs.htm>

- **Proprietary and Confidential Information:**

<http://www.acgov.org/gsa/departments/purchasing/policy/proprietary.htm>

6. The undersigned also acknowledges that Bidder will be in good standing in the State of California, with all the necessary licenses, permits, certifications, approvals, and authorizations necessary to perform all obligations in connection with this RFP and associated proposal documents.
7. It is the responsibility of each Bidder to be familiar with all of the specifications, terms and conditions and, if applicable, the site condition. By the submission of a proposal, the Bidder certifies that if awarded a contract they will make no claim against the County based upon ignorance of conditions or misunderstanding of the specifications.
8. Patent indemnity: Bidders who do business with the County shall hold the County of Alameda, its officers, agents and employees, harmless from liability of an nature or kind, including cost and expenses, for infringement or use of any patent, copyright or other proprietary right, secret process, patented or unpatented invention, article or appliance furnished or used in connection with the contract or purchase order.
9. Insurance certificates are not required at the time of submission. However, by signing Exhibit A – Bidder Information and Acceptance, the Contractor agrees to meet the minimum insurance requirements stated in the RFP. This documentation must be provided to the County, prior to award, and shall include an insurance certificate and additional insured certificate, naming the County of Alameda, which meets the minimum insurance requirements, as stated in the RFP.

10. The undersigned also acknowledges **ONE** of the following. Please check only one box.

- Bidder is not local to Alameda County and is ineligible for any bid preference; **OR**
- Bidder is a certified SLEB and is requesting 10% bid preference; (Bidder must check the first box and provide its SLEB Certification Number in the SLEB PARTNERING INFORMATION SHEET); **OR**
- Bidder is LOCAL to Alameda County and is requesting 5% bid preference, and has attached the following documentation to this Exhibit:
 - Copy of a verifiable business license, issued by the County of Alameda or a City within the County; and
 - Proof of six (6) months business residency, identifying the name of the bidder and the local address. Utility bills, deed of trusts or lease agreements, etc., are acceptable verification documents to prove residency.

EXHIBIT A: BIDDER INFORMATION AND ACCEPTANCE		
Official Name of Bidder		
Street Address Line 1		
Street Address Line 2		
City	State	Zip
Webpage		
Type of Entity/Organizational Structure	<input type="checkbox"/> Corporation	<input type="checkbox"/> Joint Venture
	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Limited Liability Corporation	<input type="checkbox"/> Non-Profit / Church
	<input type="checkbox"/> Other	
Jurisdiction of Organizational Structure		
Date of Organizational Structure	Federal Tax ID Number	
Name of Executive Director or Equivalent	Title	
Phone Number	Email	
Name of Contact Person	Title	
Phone	Email	
Signature	Title	
Dated this	day of	20

H. EXHIBIT D: EXCEPTIONS, CLARIFICATIONS, AMEDMENTS

EXHIBIT D: EXCEPTIONS, CLARIFICATIONS, AMENDMENTS

This shall include clarifications, exceptions and amendments, if any, to the RFP and associated Bid Documents, and shall be submitted with your bid response using the template on this page of the Exhibit A – Bid Response Packet. THE COUNTY IS UNDER NO OBLIGATION TO ACCEPT ANY EXCEPTIONS, AND SUCH EXCEPTIONS MAY BE A BASIS FOR BID DISQUALIFICATION.

Bidder Name: _____

List below requests for clarifications, exceptions and amendments, if any, to the RFP and associated proposal, and submit with your bid response.

The County is under no obligation to accept any exceptions and such exceptions may be a basis for proposal disqualification.

Reference to			Description
Page No.	Section	Item No.	
p. 23	D	1.c.	<i>Bidder takes exception to...</i>

*Print additional pages as necessary

I. SLEB PARTNERING INFORMATION SHEET

SMALL LOCAL EMERGING BUSINESS (SLEB) PARTNERING INFORMATION SHEET

In order to meet the Small Local Emerging Business (SLEB) requirements of this RFP, all bidders must complete this form as required below.

Bidders not meeting the [definition of a SLEB \(http://acgov.org/auditor/sleb/overview.htm\)](http://acgov.org/auditor/sleb/overview.htm) are required to subcontract with a SLEB for at least 20% of the total estimated bid amount in order to be considered for contract award. SLEB subcontractors must be independently owned and operated from the prime Contractor with no employees of either entity working for the other. This form must be submitted for each business that bidders will work with, as evidence of a firm contractual commitment to meeting the SLEB participation goal. (Copy this form as needed.)

Bidders are encouraged to form a partnership with a SLEB that can participate directly with this contract. One of the benefits of the partnership will be economic, but this partnership will also assist the SLEB to grow and build the capacity to eventually bid as a prime on their own.

Once a contract has been awarded, bidders will not be able to substitute named subcontractors without prior written approval from the Auditor-Controller, Office of Contract Compliance & Reporting (OCCR).

County departments and the OCCR will use the web-based Elation Systems to monitor contract compliance with the SLEB program (Elation Systems: <http://www.elationsys.com/elationsys/>).

BIDDER IS A CERTIFIED SLEB (sign at bottom of page)

SLEB BIDDER Business Name: _____

SLEB Certification #: _____ SLEB Certification Expiration Date: _____

NAICS Codes Included in Certification: _____

BIDDER IS NOT A CERTIFIED SLEB AND WILL SUBCONTRACT _____% WITH THE SLEB NAMED BELOW FOR THE FOLLOWING GOODS/SERVICES: _____

SLEB Subcontractor Business Name: _____

SLEB Certification #: _____ SLEB Certification Expiration Date: _____

SLEB Certification Status: Small / Emerging

NAICS Codes Included in Certification: _____

SLEB Subcontractor Principal Name: _____

SLEB Subcontractor Principal Signature: _____ Date: _____

Upon award, prime Contractor and all SLEB subcontractors that receive contracts as a result of this bid process agree to register and use the secure web-based ELATION SYSTEMS. ELATION SYSTEMS will be used to submit SLEB subcontractor participation including, but not limited to, subcontractor contract amounts, payments made, and confirmation of payments received.

Bidder Printed Name/ Title: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Bidder Signature: _____ Date: _____

J. EXHIBIT C: INSURANCE REQUIREMENTS

Insurance certificated are not required at the time of submission; however, by signing Exhibit A – Bidder Information and Acceptance, the Bidder agrees to meet the minimum insurance requirements state din the RFP, prior to award. This documentation must be provided to the County, prior to awards, and shall include insurance certificate and additional insured certificate, naming County of Alameda, which meets the minimum insurance requirements, as stated in the RFP.

The following page contains the minimum insurance limits, required by the County of Alameda, to be held by the Contractor performing on this RFP:

*****SEE NEXT PAGE FOR COUNTY OF ALAMEDA MINIMUM INSURANCE REQUIREMENTS*****

EXHIBIT C
COUNTY OF ALAMEDA MINIMUM INSURANCE REQUIREMENTS

Without limiting any other obligation or liability under this Agreement, the Contractor, at its sole cost and expense, shall secure and keep in force during the entire term of the Agreement or longer, as may be specified below, the following insurance coverage, limits and endorsements:

TYPE OF INSURANCE COVERAGES	MINIMUM LIMITS
A Commercial General Liability Premises Liability; Products and Completed Operations; Contractual Liability; Personal Injury and Advertising Liability, Abuse, Molestation, Sexual Actions, and Assault and Battery	\$1,000,000 per occurrence (CSL) Bodily Injury and Property Damage
B Commercial or Business Automobile Liability All owned vehicles, hired or leased vehicles, non-owned, borrowed and permissive uses. Personal Automobile Liability is acceptable for individual contractors with no transportation or hauling related activities	\$1,000,000 per occurrence (CSL) Any Auto Bodily Injury and Property Damage
C Workers' Compensation (WC) and Employers Liability (EL) Required for all contractors with employees	WC: Statutory Limits EL: \$100,000 per accident for bodily injury or disease
D Professional Liability/Errors and Omissions Includes endorsements of contractual liability	\$1,000,000 per occurrence \$2,000,000 project aggregate
E Employee Dishonesty and Crime	Value of Cash Advance
F Endorsements and Conditions: <ol style="list-style-type: none"> 1. ADDITIONAL INSURED: All insurance required above with the exception of Professional Liability, Personal Automobile Liability, Workers' Compensation and Employers Liability shall provide an additional insurance endorsement page that names as additional insured: County of Alameda, its Board of Supervisors, the individual members thereof, and all County officers, agents, employees and volunteers. Employee Dishonesty and Crime Insurance Policy shall be endorsed to name as Loss Payee (as interest may arise): County of Alameda, its Board of Supervisors, the individual members thereof, and all County officers, agents, employees and volunteers. 2. DURATION OF COVERAGE: All required insurance shall be maintained during the entire term of the Agreement with the following exception: Insurance policies and coverage(s) written on a claims-made basis shall be maintained during the entire term of the Agreement and until 3 years following termination and acceptance of all work provided under the Agreement, with the retroactive date of said insurance (as may be applicable) concurrent with the commencement of activities pursuant to this Agreement. 3. REDUCTION OR LIMIT OF OBLIGATION: All insurance policies shall be primary insurance to any insurance available to the Indemnified Parties and Additional Insured(s). Pursuant to the provisions of this Agreement, insurance effected or procured by the Contractor shall not reduce or limit Contractor's contractual obligation to indemnify and defend the Indemnified Parties. 4. INSURER FINANCIAL RATING: Insurance shall be maintained through an insurer with a A.M. Best Rating of no less than A:VII or equivalent, shall be admitted to the State of California unless otherwise waived by Risk Management, and with deductible amounts acceptable to the County. Acceptance of Contractor's insurance by County shall not relieve or decrease the liability of Contractor hereunder. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of the Contractor. 5. SUBCONTRACTORS: Contractor shall include all subcontractors as an insured (covered party) under its policies or shall furnish separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to all of the requirements stated herein. 6. JOINT VENTURES: If Contractor is an association, partnership or other joint business venture, required insurance shall be provided by any one of the following methods: <ul style="list-style-type: none"> – Separate insurance policies issued for each individual entity, with each entity included as a "Named Insured (covered party), or at minimum named as an "Additional Insured" on the other's policies. – Joint insurance program with the association, partnership or other joint business venture included as a "Named Insured. 7. CANCELLATION OF INSURANCE: All required insurance shall be endorsed to provide thirty (30) days advance written notice to the County of cancellation. 8. CERTIFICATE OF INSURANCE: Before commencing operations under this Agreement, Contractor shall provide Certificate(s) of Insurance and applicable insurance endorsements, in form and satisfactory to County, evidencing that all required insurance coverage is in effect. The County reserves the rights to require the Contractor to provide complete, certified copies of all required insurance policies. The required certificate(s) and endorsements must be sent to: <p style="text-align: center;">- Alameda County - BHCS, Insurance Coordinator, 1900 Embarcadero, Suite 205, Oakland, CA 94606</p> 	