



**ALAMEDA COUNTY HEALTH, BEHAVIORAL HEALTH DEPARTMENT (ACBHD)  
ADDENDUM NO. 2  
TO  
REQUEST FOR PRE-QUALIFICATION (RFPQ) 24-06  
SPECIFICATIONS, TERMS & CONDITIONS  
FOR  
*HOUSING SUPPORT PROGRAM***

**This County of Alameda RFPQ Addendum has been electronically issued to potential bidders via e-mail. E-mail addresses used are those in the County's Small Local Emerging Business (SLEB) Vendor Database or from other sources. If you have registered or are certified as a SLEB, please ensure that the complete and accurate e-mail address is noted and kept updated in the SLEB Vendor Database. This RFP Addendum will also be posted on the GSA Contracting Opportunities website located at [https://www.acgov.org/gsa\\_app/gsa/purchasing/bid\\_content/contractopportunities.jsp](https://www.acgov.org/gsa_app/gsa/purchasing/bid_content/contractopportunities.jsp)**

The purpose of this addendum is to incorporate a new Level of Care into the Housing Support Program (HSP) services. This new tier, Level 4, is targeted to licensed board and care homes that provide specialized supportive care. This HSP Level 4 will support the safe return of ACBHD participants with complex medical and psychiatric needs into the community. Both new and existing providers will need to apply via this RFPQ to provide HSP Level 4 services.

The following excerpts from the RFPQ have been modified to read as shown below. Changes made to the original RFPQ content within these excerpts are highlighted for reference. There should be no changes from the original RFPQ for content that is not included below.

**I. STATEMENT OF WORK**

**A. INTENT**

ACBHD intends to establish new SAN contracts or expand existing SAN contracts with HSP providers whose response conforms to this Request for Pre-Qualification (RFPQ) and meets County requirements. At this time, ACBHD has allocated \$6,851,222 per contract year for this ongoing program through Mental Health Services Act (MHSA) Community Support Services (CSS) funds.

Additional Levels of Care are listed below:

Level of Care	Monthly Reimbursement per Client	Support/Services
<b>Level 1:</b> Basic Board & Care	\$1,141	a. Care and supervision
<b>Level 2:</b> Basic Board & Care, and one support/service	\$2,277	a. Physically accessible or non-ambulatory bed b. Injection medication administration
<b>Level 3:</b> Basic Board & Care, and two or more supports/services	\$3,416	c. Intensive Activities of Daily Living (ADL) or Instrumental ADL (IADL) support d. Transitional Age Youth (TAY)-specific care
<b>Level 4A:</b> Low-Level Specialized Care*	\$4,500	One to four of the below supports: a. Oxygen management b. CPAP/Sleep management c. Ostomy d. Catheter e. Wound Care (stage 1 or 2) f. Diabetic care/insulin administration

		<ul style="list-style-type: none"> <li>g. IADLs support**</li> <li>h. Incontinence care</li> <li>i. Specialty diet</li> </ul>
<b>Level 4B: Mid-Level Specialized Care*</b>	\$6,510	<ul style="list-style-type: none"> <li>a. Five or more of the Level 4A supports, and/or</li> <li>b. Dementia Care</li> </ul>
<b>Level 4C: High-Level Specialized Care*</b>	\$8,494	<ul style="list-style-type: none"> <li>a. Hospice</li> <li>b. Continuous 24-hour Bedside Care</li> </ul>

\*See Section E. Specific Requirements for detailed services.

\*\*IADLs support must be bundled with other supports to qualify for Level 4A or 4B. If this is proposed as a stand-alone support, it would be considered Level 2.

**D. BIDDER MINIMUM QUALIFICATIONS**

For **Level 4**, additional Qualifications are listed below:

Supports/Services	Verification method
<b>Level 4A: Low-Specialized Care</b>	<ul style="list-style-type: none"> <li>• Appropriately trained staff*</li> <li>• Emergency Safety Plan and Plan of Operation</li> </ul>
<b>Level 4B: Mid-Specialized Care</b>	
<b>Level 4C: High-Specialized Care</b>	<ul style="list-style-type: none"> <li>• Appropriately trained staff*</li> <li>• Emergency Safety Plan and Plan of Operation</li> <li>• CCL license lists Hospice Waiver and/or Bedside Care</li> </ul>

\*Training must be administered by an appropriately licensed individual.

**E. SPECIFIC REQUIREMENTS**

The scope of work for HSP contractors for this RFPQ will include conformance with following throughout the program period, as needed:

If proposing to provide **Level 4 services**:

**Level 4A: Low-Specialized Care**

1. Oxygen Management
  - a. Administer and maintain oxygen equipment, including pulse oximeter
  
2. CPAP/Sleep Apnea
  - a. Operate and maintain CPAP machine and equipment

- b. Create sleep schedule/routine
- c. Document patterns and issues

- 3. Ostomy, Catheter, and Wound Care (stage 1/2)
  - a. Assess and monitor wound/change dressing
  - b. Assess and monitor stoma, following medical directions
  - c. Empty and change ostomy appliance
  - d. Monitor fluid intake and release
  - e. Drainage bag maintenance
  - f. Maintain hydration schedule
  - g. Maintenance of catheter tubing
- 4. Diabetic care/insulin administration
- 5. IADLs support
- 6. Incontinence care
- 7. Specialty diet

#### **Level 4B: Mid-Specialized Care**

- 1. Five or more of Level 4A supports, and/or
- 2. Dementia Care
  - a. Ensure delayed egress
  - b. Maintain and implement dementia plan
  - c. Wanderer/elopement care (electronic monitoring)

#### **Level 4C: High-Specialized Care**

- 1. Hospice Care and/or Continuous Bedside Care due to Multiple Medical Conditions
  - a. Mechanical soft/puree/specialized diet/feeding assistance
  - b. Resident transfer support
  - c. Repositioning
  - d. Wound Care up to stage 4 (when on hospice waiver only)
  - e. Toileting (hands-on support)
  - f. Hoyer lift
  - g. Mobility Care due to motor impairment and/or paralysis
  - h. IADLs support, incontinence care
  - i. Diabetic Care/Insulin Administration
- 2. Maintain increased caregiver support (up to 2 staff)

## II. APENDICES

### C. BID SUBMISSION CHECKLIST

- Bid Response Template:**  
Bidder should complete all sections of this document:
- Title Page
  - Copy of Current Adult Residential or Residential Care Facility for the Elderly Licensure
  - Demonstrate capacity to serve individuals living with a SMI.
  - Staff List and Schedule (using ACBHD provided Staff List and Schedule Template)
  - Supporting documents for Level 2, Level 3, Level 4A, Level 4B and/or Level 4C services or supports as outlined in the Title Page, as applicable.

### III. BID RESPONSE TEMPLATE

The Bid Response Template has been deleted and replaced with RFPQ #24-06 HSP Bid Template\_Revised.