

Questions & Answers

Q	Bidder Question	DHS Answer	Section	Pg.
1.	Please delineate the allowable expenses that can be included in the annualized \$377,000 funding described in the RFP.	<i>Bidders should submit a budget as noted in the RFP.</i>	Budget	15-16
2.	Will Providers be able to continue to bill Medicaid, as applicable, for rehab A+ services at the standard daily rate?	<i>Providers can bill within the applicable Medicaid rules. Providers should indicate projected revenue in the supplied budget template</i>	Budget	15
3.	What are the qualifications of a staff person who is providing “coverage” (as referred to in Paragraph 1 on p. 6 of the RFP)? We have had the experience in the past where we have a nurse on duty and have been told that this does not constitute coverage. For an A+ facility the regs describe “community mental health rehabilitation services are provided to consumer residents 24 hours per day, seven days per week. This includes awake, overnight staff coverage.” Can you please clarify what kind of staff are qualified to provide this coverage?	<i>Staff should meet the requirements in N.J.A.C 10:37A and the requirements in the state plan amendment. See attached memo</i>	Staffing	8, 13-14
4.	Regarding nursing services, can you please clarify what the staffing needs/responsibilities are for nurses and nurses’ aides of varying credentials (i.e. CNA, RN, LPN)?	<i>Staffing should meet the requirements of N.J.A.C 10:37A and the state plan amendment. Bidders should submit in their proposal their plan for staffing coverage to meet the needs of the population.</i>	Staffing	8, 13-14
5.	Specifically, can a CNA meet the requirements for a residential counselor?	<i>Please see the attached memo</i>		
6.	Does “legitimately prescribed medications” include medical marijuana?	Medicinal marijuana is not a prescribed medication. Medical cannabis is governed by specific State cannabis statute and regulation. Also, the federal government prohibits the use of federal grant funds by any organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. Applicants must be in compliance with all federal and State laws and regulations, including those relating to cannabis		
7.	Are there exclusionary criteria regarding the medical condition of potential consumers being referred in from nursing homes? If so, what are the criteria?	<i>Bidders should indicate in their proposal how they will meet the needs of the referred population from nursing homes.</i>	Project Description	11
8.	In the regulations, it states that clients shall be considered medically cleared if they do not have an acute medical condition requiring inpatient hospitalization, do not	<i>Individuals should be considered eligible for the home in accordance with N.J.A.C 10:37A</i>	Contract Scope of Work	6

Q	Bidder Question	DHS Answer	Section	Pg.
	<p>need nursing home level of care (that is, 2.5 hours of nursing care per day), are able to evacuate the residence within three minutes, and are capable of self-managing incontinence or other medical care needs. Is OOL (Office of Licensing) going to excuse this requirement when they perform reviews, specifically related to consumers who may not be able to evacuating the residence within three minutes and/or self-manage incontinence? Or is the expectation that the provider should decline such referrals if received?</p>			
9.	<p>With a stated program start-up date for the residence of 5/1/23, is it expected that the provider already has secured the program location by the RFP submission date? If we started our program in a rental property would there be an opportunity to access the \$600K to purchase a property later on, either in the second half of the one-year contract or in subsequent years, if renewed?</p>	<p><i>Bidders should be prepared to commence this contract as of May 1, 2023. The \$600,000 in Capital funding is available at the time of the finalized award.</i></p>	<p>Purpose and Intent, facilities</p>	<p>3, 14-15</p>
10.	<p>The RFP is for a facility with “services for at least five (5) individuals”. If we have capacity to serve more than 5 people, would this be considered a strength of our proposal? Alternately, if we were awarded a grant to serve 5 individuals at this site, would there be an opportunity to slightly expand in future years if the site had appropriate space?</p>	<p><i>DMHAS anticipates making an award for at least 5 individuals who will reside in NJ as proposed by the bidder.</i></p>	<p>Contract Scope of Work</p>	<p>6</p>
11.	<p>As an A+ Level Group Home, is it anticipated that referred Consumers will be Medicaid-eligible and NJ Medicaid billing will be available and the primary funding source? Please confirm whether Medicaid billing would be in addition and supplement deficit-funded contract.</p>	<p><i>Providers can bill within the applicable Medicaid rules. Providers should indicate projected revenue in the supplied budget template.</i></p>	<p>Budget</p>	<p>15</p>
12.	<p>With no MH FFS funding under this contract, would Medicaid-ineligible Consumers, bed holds, room & board, and pre-admission, be funded under the annual deficit funded contract of \$377,000?</p>	<p><i>Correct</i></p>	<p>Budget</p>	<p>15</p>
13.	<p>Is the provider able to or required to charge Consumers with Residence/Consumer Fees consistent with our agency’s policy at our other A+ Group Homes, which receive</p>	<p><i>Yes an agency may charge fees within their own policy however it must be reported as revenue if awarded the contract.</i></p>		

Q	Bidder Question	DHS Answer	Section	Pg.
	supplemental funding through MH FFS? These fees would further support the services provided. How much flexibility do we have with Consumer fees? Would these fees supplement existing funding or would they be required to offset state funding?			
14.	Can you provide more information of what funding is available for the "Phase-in Budget," (e.g., allowable costs, revenue short-falls due to vacancy in the start-up period)?	<i>Funding availability is subject the proposal and the negotiation meeting for the awarded proposal.</i>		
15.	To assist with the agency's cash flow during the start-up phase, would cash advances be made available to the provider while awaiting approval of services at the new residence as a Medicaid-eligible provider? Our experience with NJ Medicaid approval on a new program, even with existing Medicaid-funded programs in operation, is that the approval process through the state and Gainwell can take some time.	<i>No. Agencies will receive a monthly payment based on their deficit funded contract ceiling.</i>		
16.	We understand that for this RFP the applicant is required to limit the G&A expense projection to "new" G&A only by showing the full amount of G&A as an expense and the offset savings from other programs' G&A in the revenue section for the RFP submission. Is this only for initial RFP budgeting purposes. When the Annex B ROE matrix is completed (i.e., quarterly, annually), will this offset savings adjustment to revenue be required?	<i>No. Providers should project the incremental G&A in the budget allocating the G&A% as this relates to the entire agency budget. The ROE G&A is reported as actual based on allocation method.</i>		
17.	A minivan would most likely be needed to support this program. If we are unable to purchase a vehicle for under \$30,000, could the purchase be supplemented with the deficit funded contract of \$377,000 to the extent needed?	<i>The maximum amount allowable for the purchase of a vehicle under DHS rules is \$30,000. This limitation excludes passenger vans or specialized adaptive vans for handicapped consumers</i>		
18.	Is a nurse required to be on site 24/7? Is an LPN acceptable, or is an RN required?	<i>Staffing requirements are specified in N.J.A.C 10:37A and the attached memo</i>		
19.	What are the minimum staffing requirements?	<i>Staffing requirements are specified in N.J.A.C 10:37A and the attached memo</i>		
20.	This RFP is for A+ housing, yet a requirement is that staff must have a flexible schedule adjusted to individuals' needs, which is not possible when following A+	<i>Staffing requirements are specified in N.J.A.C 10:37A and the attached memo. Staffing is required 24/7 however flexibility may be needed to provide additional support.</i>		

Q	Bidder Question	DHS Answer	Section	Pg.
	procedures. Please provide clarification as to the flexible scheduling detail on page 7 with respect to A+ program requirements.			
21.	Can we bill Medicaid? If consumer has Medicare, can we bill NJMHAPP? Can NJMHAPP be billed for room & board?	<i>This will be a deficit funded contract and NJMHAPP cannot be billed</i>	Purpose and Intent	3-4
22.	Will DMHAS or the organization select clients for this program?	<i>As per the RFP, referrals for this home will be approved and may be assigned by DMHAS.</i>	Contract Scope of Work	6
23.	Can an organization structure the program to serve individuals with similar medical needs (i.e. all five individuals have diabetic needs)? Or does the program have to simultaneously serve individuals of varying needs?	Per the RFP, Individuals may have medical needs such as but not limited to: 1. Incontinence 2. Diabetes with difficulties self-administering insulin. 3. Obesity 4. Ambulation Impairment 5. Self-injurious behavior (burning, cutting, teeth/hair pulling) 6. Florid psychosis/active fixed delusions 7. Cognitive impairment (or brain injury) 8. Metabolic Syndrome 9. Daily living skills (showering, eating, toileting, etc.) 10. Independent living skills deficits (budgeting, cooking, etc.)	Background and Population Served	5
24.	Is there an age restriction on individuals served?	<i>Individuals must be 18 or over. Referrals for this home will be approved, and may be assigned, by DMHAS and will prioritize those currently residing in a nursing facility that can transition to the residential level of care in this RFP.</i>	Contract Scope of Work	6
25.	Is the intent for this program to move to a Fee for Service billing model in subsequent years, if so what timeframe is anticipated?	<i>This will be a deficit funded contract that may be annualized.</i>	Purpose and Intent	3-4
26.	Is NJMHAPPs a viable billing source, or is reimbursement only Medicaid and deficit funded contract?	<i>This will be a deficit funded contract and NJMHAPP cannot be billed</i>	Purpose and Intent	3
27.	Page 4, paragraph two of the RFP: can you please clarify how reimbursement for this contract will be provided. <i>The contract ceiling for the deficit funded contract will be up to a total of \$377,000 in annualized funding for five individuals. The successful bidder will not be reimbursed for services under a mental health fee for service contract.</i>	<i>Reimbursement will occur via the \$377,000 deficit funded contract, and revenue generated by the provider including but not limited to billing Medicaid or other applicable insurance.</i>	Purpose and Intent	4

Q	Bidder Question	DHS Answer	Section	Pg.
28.	Can the \$600K in the acquisition and the \$100K for modifications be combined into up to \$700K for the acquisition?	<i>No, the up to \$600,000 is for the purchase of a property and the up to \$100,000 is for renovations.</i>	Purpose and Intent	3
29.	Given that the RFP requires the property to be single-story, is there a way to use an existing Group Home for this RFP and relocate the current residents into the new property identified?	<i>An existing Group home under contract cannot be utilized for this award.</i>		
30.	Page 4 indicates that the anticipated contract start date is May 1, 2023, to commence the phase-in. When would be required to have a property identified, closed and ready for occupancy?	<i>The actual start date is subject to negotiation however please note that DMHAS reserves the right to terminate a contract that has not commenced services within 60 days of award.</i>		
31.	Will DMHAS advance any of the funds for the acquisition and modifications or are we expected to front all the funds until occupancy is ready?	<i>The Capital funding will be made available at the time of contract.</i>		