

**STATE OF INDIANA**

**Request for Proposal 22-71736**

**Respondent Clarifications**

**INDIANA DEPARTMENT OF ADMINISTRATION**

***On Behalf Of***

**The Indiana Family and Social Services**

**Division of Mental Health and Addiction**

***Request for Proposal Regarding:***

**Assessment of Federal Culturally Linguistically Appropriate Services (CLAS) Standards in Indiana’s Community Mental Health Center (CMHC) Workforce and Service Provision**

**Health Management Associates, Inc.**

**Response Due Date:** **Thursday, October 27, 2022 at 3:00 PM EST**

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Indiana Department of Administration

Procurement Division

402 W. Washington St., Room W468

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The State requests responses to the following clarifications listed below. All clarifications must be answered in writing and submitted by no later than the due date listed on page 1. Written responses and updated attachments (if necessary) should be submitted via email to Teresa Deaton-Reese at [tdeaton@idoa.IN.gov](mailto:tdeaton@idoa.IN.gov).

1. **Best and Final Offer Opportunity:**

The State is giving an opportunity for the Respondent to improve their pricing proposal. The Respondent’s Best and Final Offer (BAFO) will be used in calculating their final cost scores according to the evaluation criteria and formula set forth in the RFP.

The Respondent is required to use the Cost Proposal Template (Attachment **D**) to submit their BAFO. A Respondent’s BAFO must include all costs for the original proposal, and pricing reductions should be based on reduced costs, not reduced services.

If the Respondent is providing a BAFO, they must also submit updated MWBE and IVOSB Subcontractor Commitment Forms (Attachment **A** and **A1**) and updated commitment letters that align with the BAFO pricing.

1. **Clarification Questions:**

The State requests responses to the following questions.

1. Please explain the link between behavioral health, healthcare, and health equity in the context of this project. Please describe how your team’s experience will lend itself to successful project execution.
2. How will your organization collaborate with and reach rural areas? How will you mitigate limitations in technology access?
3. How will you safeguard the sustainability of the internal project team? How will your proposed approach allow for ongoing implementation efforts and training?
4. What is your hypothesis about the disparities of underserved groups in Indiana that exist related to each branch of the assessment (internal culture of CMHCs and delivery of services)? How will you measure disparities in Indiana’s CMHCs to confirm or reject your hypothesis? How will you propose and implement recommendations that reduce the identified disparities?