



**COMMUNITY-BASED SERVICES**

**RFP#2026CBSPI**

**Issue Date: Friday, April 3, 2026**

No.	RFP Section	Page No.	Question / Request for Clarification
1	Section 2: Program Information	8-9	What is the expected number of referrals per month per provider, and how will MDCPS ensure consistent referral flow throughout the contract period? <b>We do not have a number a this time.</b>
2	Section 2: Program Information	8-9	How will referrals be prioritized and distributed among multiple providers within the same service area? <b>There will be a rotation process of referrals.</b>
3	Section 2: Program Information	8-9	What happens if referrals are too low or exceed provider capacity? <b>If is it higher, we will re-assess the numbers and distribute accordingly, and if lower, we would expect to promote services within the state to increase awareness of the service.</b>
4	Section 2: Program Information	8-9	What are the eligibility requirements for families, and are referrals primarily prevention, diversion, or post-investigation? <b>Referrals forwarded by Community Resource (CR) for prevention.</b>
5	Section 2: Program Information	8-9	Are providers assigned specific service areas, and are services voluntary or required? <b>Yes, we will be statewide, and services are voluntary and court-ordered.</b>
6	Section 2: Program Information	8-9	What level of service is expected per family (frequency, duration, and location of services)? <b>That will be based on the services with outlined in your program.</b>
7	Section 2: Program Information	8-9	How does MDCPS account for variability in family engagement and completion when evaluating service delivery? <b>You will be a standard of care once referred and those variables will be considered.</b>
8	Section 2: Program Information	8-9	What are the expectations for coordination with MDCPS staff and other providers? <b>Collaboration is expected periodically as the case progresses.</b>
9	Section 1.7 Additional Information	6-7	How does the cost reimbursement model support provider sustainability when referral volume is variable? <b>We will look at referral volume when engaging a provider; however, each provider should have sustainability within their agency.</b>



10	Section 1.7 Additional Information	6–7	What costs are allowable under the contract, and are there any limitations that may affect full cost recovery? <b>Costs related to the services provided.</b>
11	Section 1.7 Additional Information	6–7	How are startup costs, training, and staffing expenses handled within the budget and reimbursement structure? <b>Cost are reimbursed per diem.</b>
12	Section 1.7 Additional Information	6–7	How are projected expenses reviewed and approved for the initial cash advance?  <b>The reimbursement is per diem.</b>
13	Section IV.C Consideration and Method of Payment	36– 37	What is the expected turnaround time for reimbursement after submission of required financial documentation? <b>Reimbursements are monthly, and the turnaround if all documentation is received, it generally within 30 days.</b>
14	Section XIX Reporting	48	How does MDCPS ensure timely review and approval of monthly financial reports and general ledger documentation? <b>The Subgrantee Unit oversees that part.</b>
15	Section IV.C Consideration and Method of Payment	36– 37	What safeguards are in place to reduce financial risk for providers operating under a reimbursement model? <b>The grants awarded are based on the grant funding being available.</b>
16	Section 2: Program Information	8–9	How does MDCPS define a family served, successful outcome, and completed case? <b>It will be determined based on successfully discharging and stable aspects of the referral.</b>
17	Section 2: Program Information	8–9	How are outcomes such as caregiver protective capacity and risk reduction measured? <b>It will be measured through evaluations of the service within your program.</b>
18	Section 2: Program Information	8–9	Are providers evaluated based on outputs, outcomes, or both? <b>Outcomes.</b>
19	Section 2: Program Information	8–9	How are no-shows, dropouts, and partial engagements counted in performance evaluation? <b>Those who do not complete the program would be screened out and only used for referral purposes.</b>
20	Section 2: Program Information	8–9	How does MDCPS account for external factors (e.g., client engagement, referral quality) when assessing provider performance? <b>Your evaluative methods will include those variables.</b>
21	Section 4.3 Proposal Format	23	What are the required staffing ratios, caseload expectations, and staff qualifications? <b>It is expected that your program would staff based on the number of referrals</b>



			received to accommodate the need, and to hire qualified staff to maintain this type service.
22	Section 1.7 Additional Information	6-7	Are training, supervision, and professional development costs allowable under the reimbursement model? <b>Yes.</b>
23	Section 2: Program Information	8-9	What expectations exist for ongoing staff training and service quality? <b>If one is licensed, those licensing agencies formulate the requirements.</b>
24	Section XIX Reporting	48	What data systems or platforms are providers required to use, and what level of access is provided? <b>Smartsheet and Pathways portal with limited access.</b>
25	Section XIX Reporting	48	What are the reporting requirements (financial and programmatic), including frequency and level of detail? <b>Monthly.</b>
26	Section 1.7 Additional Information	6-7	Will MDCPS provide training, guidance, and technical assistance for data reporting? <b>Some training will be provided for programmatic areas. Guidance will be available and TA.</b>
27	Section XIX Reporting	48	What oversight activities (e.g., audits, site visits, fidelity reviews) should providers expect? <b>Audits and site visits will be conducted.</b>
28	Section 4.7 Award	30- 31	Are providers able to request changes to service delivery models after contract award? <b>Only through a modification, if it is in conjunction with the RFP.</b>
29	Section IV + Termination	36- 37	Under what conditions can MDCPS adjust referral distribution, reduce scope, or terminate contracts? <b>It is up to the digression of the agency.</b>
30	Section 4.7 Award	30- 31	Are there opportunities for expansion based on provider performance? <b>It is an opportunity to expand.</b>
31	Section XXIX	52	What insurance and liability requirements are providers responsible for? <b>Your agency requirements.</b>
32	Section 2: Program Information	8-9	Are there any additional evidence-based programs (EBPs) identified in the RFP for consideration beyond those already listed? <b>No as the RFP requires the specific EBPs.</b>
33	Section 1.7 Additional Information	6-7	Is startup funding allowed for evidence-based programs (EBPs), and will funding be made available to cover ongoing licensing costs associated with those EBPs? <b>Costs are based on the services needed, and budgets can cover the costs associated with ongoing training and requiremnts.</b>

