

REQUEST FOR PROPOSAL ADDENDUM #1

Post Permanency Support Services

It is hereby agreed by the State of Vermont, **Family Services Division** that the RFP posted on June 1, 2026, titled “Post Permanency”, is hereby amended as follows:

Reasons for Addendum:

Response to Bidders Question:

Questions:

- 1. 2.5.1 and Attachment A point 5A (Scope of Work) – What are the services requirement for billing purposes?**
 - a. Requirements for a home visit**
 - b. Requirements for collateral contact**
 - c. Requirements for consultations**

Answer:

- a. Requirements for a home visit**
 - i. Must take place in the home of the Medicaid member or caregiver of the Medicaid member (telehealth in the home may count if there is a documented reason why it is necessary)
- b. Requirements for collateral contact**
 - ii. Must include 2-way communication such as phone call or face-to-face contact, must be directly tied to a specific active treatment plan, and must include external collaboration or discussion of meeting the member’s direct case management needs.
 - iii. Provider should document who was contacted and their relationship to Medicaid member, date and time (should be more than 15 minutes), how the contact correlates to the member’s plan of care or addresses medical/psychosocial need, and the outcome (info gathered or care coordinated).
- c. Requirements for consultations**

Consultations can include any discussion, meeting, etc. with a caregiver, family member, or other team member or professional working with qualifying children or youth for purposes of psychoeducation and/or awareness building to allow an adoption-competent lens. To count as a consultation the action should not already count as a home visit or collateral contact of a case load member.

2. **2.11 and Attachment A point 11 (Scope of Work) – Is the target length 1 or 1-2 years? 2.11 says 1-2 years and Attachment A says 1 year, Q2. For clients that are open, is the expectation to close them if that been open longer than the target length?**

Answer: 2.11 should state 1 year. This is a target average length. Cases are not expected to automatically close after 1 year. Instead, the length of case time open should be considered as a factor, along with the needs of the family, when managing target caseloads and waitlists.

3. **Attachment A point 1 (Program administration) – Do change of placement forms need to be submitted when a client has moved out of the family home to live with someone else (e.g., other family member, girlfriend/boyfriend) for an unknown period of time, or only when accessing an intervention or treatment?**

Answer: Change of placement forms need to be submitted when a client moves out of the family home for any reason (including but not limited to intervention, treatment, moving to live with another family member/friend/adult, or leaving the caregiver’s home for any other reason). Any move from the home for longer than 2 weeks should be considered a change of placement. Visit/respite for shorter than 2 weeks should not be considered a change of placement.

4. **Attachment A point 6 (Program Administration) – What survey is being referenced?**

Answer: The client satisfaction survey and provider satisfaction survey that are sent out annually. The questions asked are reviewed annually with input from the Post Permanency Program Manager and the Post Permanency Provider agency managers.

5. **Attachment A point 7 (Program Administration) – Do we still need to collect social security numbers?**

Answer: Once billing directly in Gainwell begins, providers will need the UID number, but the social security number should not be needed.

6. **2.11 – Contractor shall monitor PPSP Service Providers’ caseloads based on a target caseload (currently 21) – Is it anticipated this number will change as it says “Currently”?**

Answer: An amendment to the contract would be needed for the target caseload to change. A change would be dependent on the budget.

7. **3.1.1. Prices and/or rates shall remain firm for the initial term of the contract. The pricing policy submitted by Bidder must (i) be clearly structured, accountable, and auditable and (ii) cover the full spectrum of materials and/or services required.**

- a. **Is the state prepared/ able to change the current PMPM rate based upon the true cost of running this program?**
- b. **When it says "the initial term of the contract" does this mean the first year only and negotiable after that?**
- c. **Would the state accept a proposal with indexed increases over the potential 4 years of the contract that takes into account the cost of running this program? (meaning year 1 rate, year 2 rate etc)**

Answers: This would be budget dependent

- a. Yes
- b. Yes
- c. Yes