

Lead qualifications

Does the lead coordinating organization (LCO) have to be physically based in Chicago?

- Yes, the RFP restricts the award to organizations headquartered in Chicago.

Are for-profit organizations prohibited from serving as the LCO?

- No. The request for proposal (RFP) gives preference to nonprofit organizations to be funded as the LCO, but does not prohibit for-profit organizations from serving as the LCO.

Is it allowable to apply as a lead agency, but to also be listed as a potential partner/subdelegate on another agency's application?

- Yes. Each application will be considered separately and evaluated on its own merits.

Can the LCO be a joint-venture corporation?

- Yes, organizations can come together to form partnerships and apply as one coalition to become the LCO, provided that the coalition will function as one unit in interactions and contracts with the City and CDPH.

Based on the project description, the CDPH is requesting for the development and management of a citywide COVID Tracing Corps and a COVID Resource Coordination Hub? Can I apply for both positions in this RFP?

- Applicants for LCO must implement both the COVID Contact Tracing Corps (Corps) and COVID Resource Coordination Hub (Hub).

When will the LCO be selected and the award announced so we can develop our workplan accordingly?

- CDPH anticipates the start date of the LCO contract will be July 1, 2020.

Selection of subcontractors

How will the 30 community-based organizations (CBOs) be identified and selected? Will there be a separate RFP for CBOs once an LCO is awarded?

- It is a requirement that the LCO conduct a competitive process to select the subcontracted CBOs. Selection of subcontracted CBOs will be made at the discretion of the LCO.

When is deadline for CBO selection?

- The RFP requires at least 150 contract tracers be hired by August 1, 2020, therefore at least some of the CBOs will need to be selected and onboarded before that. Otherwise the RFP provides no deadline for CBO selection.

How can CBOs find LCOs to partner with on the RFP?

- There is no expectation that the LCO have partner CBOs identified before it submits its application for the RFP. CBO selection will occur after the LCO is selected.

Do applicants for lead agencies have to include memoranda of understanding or letters of intent from our subdelegates in the application?

- No.

LCO relationship to subcontracted CBOs

The chart on page 5 of the PowerPoint shown at the bidders' conference webinar lists 20 areas, and the RFP calls for 30 CBOs. Should each of the 20 areas have one CBO and some subset of areas will have two CBOs to get to 30?

Is there an expectation that there will be at least 30 CBOs, and that there would be a CBO in each of the defined community areas

- Twenty-eight community areas have been prioritized in the RFP. The RFP requires the LCO to contract with approximately 30 CBOs, but it does not specify how many organizations from each community area are to be selected as subcontracted CBOs. Selection of CBOs will be at the discretion of LCO.

How many LCOs will be selected to oversee this project? If more than one, will there be one per hub?

- CDPH anticipates one LCO will be selected through the RFP.

Do CBOs need to submit detailed budgets for the RFP?

- No. There is no expectation that CBO partners are identified and selected by LCO applicants prior to the submission of the RFP application.

Is the primary role of CBOs to hire contact tracers and referral coordinators, or will the LCO also be able to hire employees into this role as well?

- The RFP includes two program areas: the Corps and the Hub.

- Corps: Funding available for the Corps will primarily be subcontracted to CBOs. At least 85% of available funds will go to Chicago-based CBOs to hire Chicago residents as contact tracers and supervising contact tracers.
- Hub: The LCO is required to implement the Hub directly or through subcontract. In its application, the LCO will specify its plan for creating the Hub, which may include hiring referral coordinators and supervising referral coordinators directly.

Who is responsible for writing the job description for Contact Tracing Corps, LCO or CBO?

- The LCO will work with CDPH to determine appropriate job description for all positions outlined in the RFP.

Our agency is interested in being the LCO; however, we also have workforce development programs and would also like to serve the role of a CBO. Can a LCO act as a CBO for the contact tracing portion of this RFP? For example, if we select 30 CBOs to implement this project, two of those CBO contracts would potentially be awarded to our own workforce development programs?

Can LCO be a sub for a community-based site of contact tracing?

- The RFP does not preclude an LCO from subcontracting with CBOs under its organizational umbrella. However, it is a requirement that the LCO conduct a competitive process to select the subcontracted CBOs.

Resource Coordination Hub

Does the LCO subcontract the COVID Resource Coordination Hub positions?

- Once selected, the LCO will make this decision. The LCO is allowed to establish the Hub directly or through one or more subcontracts.

What is the relationship between the Contact Tracing Corps and the Resource Coordination Hub?

- During the course of contact interviews, the Corps will identify resource needs contacts may have to successfully adopt public health guidance. The Corps will connect individuals with needs to the Hub, which will then connect individuals to appropriate resources.

Will this grant fund a service coordination position or only contact tracers?

- This RFP funds contact tracers, supervising contact tracers, resource coordinators, and supervising resource coordinators. Resource coordinators will help facilitate service coordination for individuals in need.

The RFP mentions the need for a call center. Will the call center be virtual or in-person? Will the equipment, software, and tech support be provided by the LCO, CBO, or the city?

- The RFP requires the LCO to create a Hub, which may be a call center. The LCO will determine how the Hub is organized and implemented. The LCO will need to budget for expenses related to the Hub. The city will provide the LCO access to the NowPow platform to support resource coordination.

Where will the “hub” be located? Can the resource hub contractor (or any contractor) be out of state?

- The LCO will determine how the Hub is organized and implemented, including where it is located. The RFP does not explicitly preclude subcontracts with out-of-jurisdiction contractors for the Hub. The RFP does require the LCO to subcontract with Chicago-based CBOs to implement the Corps. Further, the RFP requires that City of Chicago residents from priority community areas be prioritized for hiring for both the Hub and Corps.

What types of wraparound services for COVID 19 positive patients, and what integration is necessary for those service providers, in the context of this RFP?

- The Hub will identify resources (including organization that provide services) that meet needs of individuals diagnosed with COVID and close contacts of individuals diagnosed with COVID that may compromise successful adoption of public health guidance. The Hub will provide tailored support, referrals and linkages to these resources.

We would like to request more guidance on the Resource Center process. Does DPHS have a referral system and resources set up? What is the platform? Will DPH forward a batch of people to the resource center for follow up? Will there be an established list of resources and a referral mechanism?

- CDPH will provide a data management system for resource coordination. Additional information will be shared after the LCO is selected, including how case assignments will be made and the process for making referrals.

Clinical providers

Does the LCO need to be a healthcare organization?

- No.

How is “clinical” defined for this purpose?

- “Clinical” is defined as an institution that provides medical care as a primary service.

Can a federally qualified health center (FQHC) be both a sub-contractor for non-clinical services and also receive separate contact tracing funding for the RFP reserved for FQHCs?

- For the purposes of this RFP, FQHCs are considered clinical organizations. This RFP requires the LCO to subcontract with non-clinical CBOs. FQHCs may apply to be the LCO under this RFP, but they are not eligible to be subcontracted CBOs. CDPH is making separate funding available to healthcare providers, including FQHCs, to support contact tracing.

We are a nonprofit, community-based provider of substance use and co-occurring mental disorder treatment. Are we considered “clinical” for the purposes of this solicitation and therefore precluded from being a COVID Contact Tracing Corps member?

- No. Behavioral health providers are not considered “clinical” for the purposes of this RFP. As such, behavioral health providers are not precluded from applying to be a subcontracted CBO.

Can the CBOs be providing clinical/health and non-clinical services and therefore qualify as an eligible CBO? Can qualifying CBOs be providing prevention and treatment services, or health education?

- The RFP stipulates that subcontracted CBOs be “non-clinical,” or organizations that do not provide direct medical care as a primary service.

Can contact tracers be existing staff at the CBOs or do they have to be new hires?

- The RFP does not preclude hiring existing staff at CBOs.

Privacy

Other states have been reluctant to share the name of the infected person with those who came in contact due to HIPAA. The Hub concept seems to anticipate greater connections there. Can you expand on your view of HIPAA in establishing the Hub?

- Case investigations, or conversations with a person who has been diagnosed with COVID-19, will be conducted by public health officials or healthcare institutions. Contact tracers and referral coordinators will only receive names of contacts. The names of persons diagnosed with COVID-19 will not be shared with contact tracers or referral coordinators.

Hiring of employees

Will CDPH provide a formula to be used to distribute 450 tracers (and 100 Coordinators/ Supervisors) across the 20 areas?

- CDPH will not provide a formula for distribution of the employees required to be hired under this grant beyond those specified in the RFP.

Who has responsibility for the actual sourcing, screening, hiring contact tracers – CBO or LCO? If the LCO is responsible for “onboarding,” does its responsibility extend to these roles?

- The LCO has general responsibility for successful onboarding of all workforce hires employed under this grant, including the contact tracers, supervising contact tracers, resource coordinators, and supervising resource coordinators. For the Corps, employee sourcing, screening, and hiring will be done by CBOs. For the Hub, the employee sourcing, screening, and hiring may be done directly by the LCO or by identified subcontractor(s).

While it is the primary role of the CBOs to hire contact tracers and resource coordinators, will the LCO also be able to hire employees into these roles as well?

- This is at the discretion of the LCO. If the LCO chooses to hire employees, it must follow all guidance and requirements outlined in the RFP.

Are there any age limits or educational requirements for hiring contact tracers? Are there guidelines around the ages of the contact tracers?

- Age limits will be based on the hiring and employment policies of the LCO and subcontracted CBOs. There is no minimum education requirement.

Is there an English requirement?

- The RFP does not include an English requirement.

Do you know what pre-hire requirements you will have? Are there any criminal backgrounds that may prevent someone from being hired?

- This will largely be governed by policies that exist within the LCO and CBOs themselves as they will be the hiring entities. The RFP specifically indicates that returning citizens and individuals with criminal justice involvement should be considered for hire. Individuals with convictions on some crimes, such as identity theft and fraud, should not be prioritized for hire due to the nature of the work involving sensitive information.

What are the skill requirements of the contact tracers? Are there any requirements (reading level) to successfully complete the training?

- This will largely be governed by policies that exist within the CBOs themselves as they will be the hiring entity. Hard skills required for the contact tracing role include ability to read and understand reports and data entry. Soft skills include the ability to quickly build rapport, empathy, and compassion.

Will the employees hired through this RFP be City of Chicago employees?

- No.

Would the LCO or subdelegates be able to pay employees at a rate higher than is required through the RFP?

- Yes.

If the City would consider a vendor with an existing network of contact tracers in place, is there flexibility on the amount of pay, given an already employed workforce that is active in the Chicago community providing care and support services?

- The RFP requires contact tracers, supervising contact tracers, resource coordinator, and referral coordinators be hired full time, provided competitive benefits, and paid, at minimum, the hourly salaries specified in the RFP. If the LCO or subcontracting CBOs propose salary and benefits that do not meet these requirements, they must submit written justification which will be considered as part of the competitive review process.

This RFP is structured to require the hiring of an entirely new staff. Is the City of Chicago amenable to leveraging an already existing network of Chicago care providers for this work?

- The RFP does not preclude hiring existing employees as contact tracers and resource coordinators. The RFP does require Corps staff be hired through subcontracted CBOs and that City of Chicago residents from high priority community areas be prioritized for hiring for both the Corps and Hub.

Tech and protocols

Is there a certain contact tracing model CDPH recommends?

- CDPH will provide specific guidance and standards for how contact tracing is to be implemented, including specific data collection requirements. Those data collection requirements are guided by a methodology and script for collecting data. CDPH will provide detailed questions that need to be asked and answered and data that needs to be collected and reported. CDPH will ensure all employees receive appropriate training, including training on HIPPA and data security and confidentiality. This does not preclude the LCO or subcontracted CBOs from using additional trainings that it finds useful for its employees.

Is the database and questionnaire products included in the RFP or will Chicago be providing?
Will CDPH have a data collection tool/database for us to use or are we expected to identify and pay for one.

- CDPH will provide a contact tracing and resource coordination data management system and interview protocols, as well as guidance on public health recommendations for contacted individuals.

What functionality does the NowPow platform offer?

- NowPow provides a clear overview of its functionality on its website, NowPow.com. Once CDPH has selected the LCO, we will work with the LCO and NowPow to ensure the platform meets the needs of the hub.

Can the vendor propose alternative systems to the NowPow?

- The RFP does not preclude the use of alternative technology solutions.

Does NowPow serve as a resource coordination database only or is there capacity for data collection?

- The CDPH data management system, which includes NowPow, will allow for both resource coordination and data collection.

What technology solution will the LCO use for the purpose of contact tracing? What software or database will be used to provide interview questions, capture the responses, do the tracing, and provide mapping and metrics for the project?

- CDPH will provide this information when the LCO has been selected.

How will a complementary technology solution be considered?

- If needed, CDPH will work with the LCO to consider and review additional technology solutions.

How will data be shared between all stakeholders, including, but not limited to, the city, the LCO, the CBOs, and the Illinois Department of Public Health (IDPH)?

- CDPH will provide contact tracing case assignments directly to the LCO and/or CBOs through its online data management system or through other approved methods. Contact tracers will be required to enter data into the data management system or through other approved methods. Resource coordinators will receive assignments through and enter data into the CDPH online data management system or through other approved methods. CDPH is responsible for reporting data to IDPH. More information about case assignments and data management will be provided after the LCO has been selected.

Will there be a statewide Customer Resource Management to document contacts?

- CDPH will be using a local data management system or other methods to manage contact tracing and resource coordination.

We interpret the RFP to say that it is the responsibility of the LCO to ensure CBOs supply contact tracers with access to technology their employees require to do the contact tracing including mobile phones, computers, and internet access. Is that accurate?

- The LCO will be responsible for ensuring contact tracers have the equipment necessary to do their work. Once selected, the LCO will determine the mechanisms for providing equipment, which may include requiring CBOs to provide this equipment directly to their employees.

Will we need to collect phones, computers, hotspots, and other equipment back from the contact tracers upon conclusion of the program and/or their separation from the program?

- Per federal guidance, items of equipment with a current per unit fair market value of \$5,000 or less may be retained, sold or otherwise disposed of with no further obligation

to the Federal awarding agency.

Submission requirements

Do we need to submit detailed budgets for the CBOs?

- No.

Is there a limit on characters for the work plan/timeline?

- No.

Training

Please describe/list the type of trainings the city will offer outside contact tracing. Is there a preferred remote learning curriculum for training the contact tracers? Will remote training of contact tracers be allowed? Is CDPH providing all the contact tracing training or will the Lead be required to train them using CDPH training?

Are the LCO and/or CBOs to select and deploy their own contact tracing training curriculums or will the City provide guidance for a uniform curriculum (industry recognized certification) of choice?

Will we be required to use a predetermined online training platform, or will the LCO have discretion in choosing this platform? Is it expected that we have this platform already, or can we use funds to purchase?

Does the CDPH have a contact tracing training system it currently uses?

Does the CDPH have a contact tracing training curriculum that it uses within its organization?

- CDPH will provide all necessary training materials and/or training parameters for this project, including training on contact tracing, HIPAA, data security and confidentiality, and data systems. CDPH will work with the LCO to determine how training will be delivered to employees, which may include training delivered by the LCO or other partners. Remote training will be allowed. The LCO may not use funds to purchase training platforms.

What training is the LCO required to do? What is the CBO required to do? Does the LCO need to budget for training?

- The LCO and subcontracted CBOs will need to budget for trainings deemed necessary above and beyond the training provided/facilitated by CDPH.

Budget

In the Bidder's Conference, the budget for Year 1 is \$40M, divided into \$29M for CBOs and \$11M for the LCO. Other messaging said 85% of the funding would go to CBOs. 85% of \$40M is \$34M. Can you explain?

- 85% of the funding available for the Corps will be directed to CBOs. This is 85% of \$29 million, or \$24.65 million.
- Approximately \$11 million of the grant is reserved for the Hub, which will be allocated at the discretion of the LCO. The LCO may either retain this funding and launch the Hub on its own, or may subcontract it to one or more subcontracted organizations.

Do we need to separate the cost for COVID Contact Tracing Corps and the COVID Resource Coordination Hub?

- Yes. Respondents will need to submit separate budgets for each program area in their applications that match the allocations outlined in the RFP.

What is the minimum and maximum dollar award that will be granted for this contract?

- The full contract award for this grant is \$56 million over two years, with \$40 million available in the first year, with a potential for a one-year extension of \$16 million in the second year.

If the LCO outsources some of the tasks, would it be necessary to include the subcontractors in the proposal? If so, would each subcontractor be required to provide references/capabilities?

- The LCO should submit a full and complete budget with its application. If subcontractors are known at the time of application development, the LCO should include subcontractors in the budget following the RFP guidance. The RFP does not preclude including references/capabilities for known subcontractors. There is no expectation that the LCO will have identified the subcontracted CBOs to provide contact tracing before it submits its application for the RFP. Contact tracing CBO selection will occur after the LCO is selected

Is there flexibility in the allocation of the different fund "buckets," assuming that the total cost of the project does not exceed the stated contract limit?

- The RFP specifies the approximate amount of funding available for the Corps and Hub to accomplish the specified scopes of services. While CDPH may consider flexibility, the LCO must ensure requirements related to number of employees to be hired, number of cases to be worked, and salary/benefits are met.

The RFP outlines the benefits that CBOs are required to provide to employees. Can you provide more detail about the minimum benefits required (healthcare insurance? Paid time off?)

- The RFP does not specify minimum benefits, but does require benefits be competitive.

Please confirm our understanding of these intended budget allocations is correct. We have applied the *Section IV.b (page 6)* requirement that at least 85% of funding available for the Tracing Corps (which equals \$29M per *Section VI*) goes to the 30 non-clinical CBOs to mean that \$24.65M shall be allocated among the 30 CBOs to cover their costs associated with staff salaries, benefits, and direct and indirect/administrative costs CBOs will incur supporting the initiative. Stated differently, the \$24.65M going to the CBO community equals the \$29M Contact Tracer allotment minus \$4.35M for direct and indirect/administrative costs which the LCO will incur supporting the initiative.

- This is correct.

Please confirm our understanding of these intended budget allocations is correct. We have applied a similar principle as that espoused by *Section IV.b (page 6)* requirement that at least 85% of funding available find its way back to the community IF we, as the LCO, choose to subcontract out the Hub rather than do it ourselves. The Resource Hub subcontractor would receive a budget of \$9.35M to cover the Hub's costs associated with staff salaries, benefits, and direct and indirect/administrative costs a subcontractor will incur supporting the initiative. Stated differently, the \$9.35M going to a subcontracted Hub equals the \$11M Resource Hub allotment minus \$1.65M for direct and indirect/administrative costs which the LCO will incur supporting the initiative.

- Allocation of funding for the Hub will be made at the discretion of the LCO. The RFP does not explicitly apply the 85% requirement to the Hub, but applicants may apply this requirement if they choose.

General contact tracing questions

Governor Pritzker has said that Chicago needs about the 30 contact tracers per 100,000 people? That requires 810 contact tracers, but this grant only covers 450. What will make up the difference?

- CDPH agrees with the 30 contact tracers per 100,000 goal to support contact tracing in Chicago. That number is inclusive of case investigators, contact tracers, and resource coordinators. In addition to the workforce hired under this RFP, additional contact tracing roles will be filled by CDPH, healthcare partners, including FQHCs and hospitals, and through volunteers/students.

Are case investigators expected to assess COVID-19 patients for the ability to self-quarantine, and/or to authorize social support services to enable self-quarantine?

- Case investigators will not be employed through this RFP. Case investigations will be conducted by public health officials and healthcare institutions. Case investigators will assess needs of individuals who have been diagnosed with COVID and connect individuals to the Resource Coordination Hub to support successful adoption of public health guidance, including, but not limited to, self-isolation.

Per the RFP, the Contact Tracing corps is expected to run 7 days/week, with 450 contact tracers generating 10 contacts/day for a total of 4,500 contacts/day. The LCO is also responsible for ensuring program activities seven days a week. Does this mean 4,500 contacts seven days of the week? Or is your intended weekly total 4,500 x 5 so that we can then divide among the 450 contact tracers to allow for five day work weeks and maintain the projected rate of 10 contacts per day?

- The 4,500 contacts per day goal is based on the assumption that 450 contact tracers are working on any given day. Over a 7 day work week and with workforce development opportunities, there will be fewer than 450 contact tracers working on some days, so the expected total number of contacts reached on those days will be fewer than 4,500. For example, if 300 contact tracers are working on the same day, approximately 3,000 contacts will be reached that day.

Does the CDPH have preferred healthcare organizations that the LCO should work with to meet needs that may compromise successful adoption of public health guidance, including self-isolation or self-quarantine? Will this be in coordination with the CDPH?

- CDPH will provide additional information about public health guidance, including specific expectations, after the LCO has been selected.

Other

There are two deadline dates associated with this RFP. The date on the PDF is June 5 at noon. However, the website says June 9. Has the deadline been extended?

- The deadline for RFP submissions is June 9, 2020. The RFP has been updated with the correct date.

How to get technical assistance?

- The City will respond to all questions about the RFP through June 3, 2020 at 3:00PM local time, the deadline for submitting questions. If you need technical assistance related to submitting an application, please refer to RFP attachments 5 and 6. Because this is an open, competitive bid, the City cannot provide individualized technical assistance.

What is the plan for the suburbs? Will the state be a separate RFP?

- The State of Illinois and suburban jurisdictions have separate funding to support contact tracing outside the City of Chicago. For more information, please contact the state or suburban jurisdictions directly.

Will there be a MBE/WBE set aside in the contact?

- There is no MBE/WBE requirement through City of Chicago delegate agency contracts, only for vendors. There is no MBE/WBE set aside for this RFP.

Will the PowerPoint be made available?

- The bidders' conference PPT will be uploaded to eProcurement system along with answers to all questions asked prior to, during, and after this webinar.

Is this webinar being recorded?

- The webinar was recorded and will be posted on the contact tracing page of the Chicago.gov/Coronavirus website.

Will the technology platforms the LCO is required to use from CDPH accommodate visually impaired and blind users?

- The City and its subcontractors will ensure accommodations are made for employees with special needs.

What are the top three elements of a lead agent?

- Please see RFP section IV. Project Description, sub-section b. Scopes of Services for a thorough description of LCO responsibilities and competencies.

Does the 4,000-character limit include spaces? When we attach more, how do we best indicate/organize that for the reviewer? Will attachments be reviewed and scored.

When responses to the proposal requirements exceed the character length (4000 characters per section) for input into the e-procurement portal, it indicates that attachments are allowed. Are there guidelines for those attachments such as a specified format, page or character length, etc. for the application package?

- The 4,000-character limit does include spaces. Clearly label additional narrative and include as an attachment to your RFP application. Attachments will be reviewed and scored.

Would there be a need for employees to drive from place to place during the workday? Will the tracers have any face-to-face contact with COVID-positive patients?

Is it expected that all contact tracing follow-up will be via telephone (call center or distributed locations) or that there will also be some in person work required? If so, what are the expectations for face-to-face contact by Contact Tracers and Resource Coordinators with clients/community members?

- Contact tracing will be primarily provided using remote technology, including phones and email. As the epidemic matures, and as the number of COVID-19 contacts drops over the course of the epidemic, contact tracers may be asked to provide in-person services, including outreach, education and information dissemination, and other community-based services. Should contact tracers be asked to provide in-person services, CDPH will provide clear guidance about necessary safety measures, including measures to protect employees from exposure to COVID.

Is the plan for normal business hours five days a week? How many hours are the contact tracers working per day? Should we assume 8 hours per day? What are the hours of operation of the Resource Coordination Hub?

- The RFP requires the LCO to ensure the Corps and Hub operate seven days per week. The RFP does not specify hours of operation for the Corps or Hub or how many hours employees work per day. However, the RFP does specify the number of individuals the Corps and Hub will be required to reach each day (i.e, the number of working contact tracers X 10 contacts/day). The LCO will need to determine a

staffing model that supports achievement of these requirements, which may include non-traditional work hours and schedules.

The RFP indicates to provide sufficient time for contact tracers and resource coordinators to participate in workforce development opportunities like Earn-as-You-Learn initiative. Will the staff get paid for participating in the workforce development opportunities?

- CDPH anticipates that employees who participate in workforce development opportunities will be paid for their time engaging these opportunities. More information will be provided after the LCO has been selected.

How much time should be expected for earn and learn activities? Is your expectation that staff are paid hourly rate for time spent in learning? If so, the staff numbers would need to increase to reach the 4,500 contacts/day goal. Does this change your guidance on the total number of people to be hired?

- Additional information about Earn-as-You-Learn will be provided after the LCO is selected, including expected time commitment and staff compensation. The 4,500 contacts per day goal is based on the assumption that 450 contact tracers are working on any given day. Over a 7 day work week and with workforce development opportunities, there will be fewer than 450 contact tracers working on some days, so the expected total number of contacts reached on those days will be fewer than 4,500.

Can the City provide an advance on contract funds to allow for equipment purchase and timely wage payments for workers?

- The City cannot provide an advance on contract funds. Payment for services will be made on a reimbursement basis. However, with respect to payroll expenses, the City will provide an alternative option to reimburse approved payroll expenses through direct transfer of funds to the third-party payroll administrator used by the LCO and/or subcontracted CBO(s). Please see section VII. Fiscal Capacity in the RFP for additional details.

Do we need to provide job descriptions and resumes for Lead Agent Staff? Do we need to provide job descriptions for Contract Tracers, or Resource Coordinators and Supervisors?

- The RFP does not require job descriptions and resumes for LCO staff or job descriptions for employees hired through this RFP. If an applicant believes this information will strengthen its application, it may be included as an attachment.

Regarding the trauma-informed services: is the expectation that CBOs will operate under this general philosophy, or will CBOs be expected to adhere to specific standards and policies – and will their written admin and operations policies and practices be expected to reflect this?

- CDPH contractors and subcontractors are expected to integrate trauma prevention and trauma-informed services principles into organizational policy and practice.