

**Questions submitted to Wisconsin Department of Health Services  
In response to RFP#G1665-DLTC-BC  
Implementation of the Children’s Long-Term Support (CLTS) Medicaid Home and  
Community-Based Services Waivers for children with Autism Spectrum Disorders  
accessing intensive treatment and ongoing services**

| Question Number | RFP Page Number | RFP Section Reference | Question  | DHS Answer   |
|-----------------|-----------------|-----------------------|---|--|
| 1.              | 4, 5            | 1.1                   | Does this RFP mean that (our) County has to apply in order to keep its children’s disability program?   | No, counties have the obligation to provide services under the Children’s Long-Term Support Waivers including the autism services unless they earlier opted out. However, counties that opted out of delivering the autism services have the opportunity to reengage by submitting a proposal. |
| 2.              |                 |                       | What if another entity applies for the grant and wants (our) County to be part of its 15 counties. Does that mean that (the County) automatically gets subsumed by this other entity? Does the County have any choice in the matter?  | The specific counties listed are counties that opted out in the initial decision period. Proposers may address counties beyond those noted within the RFP for the intent of determining any future interest.   |
| 3.              | 4, 5            | 1.1                   | Are we on the brink of major change in the way we conduct our business?   | No.  |
| 4.              | 5               | 1.1                   | From Page 5, top paragraph: "Vendors may also submit a proposal identifying the Proposer's interest and ability to cover other areas of the state."<br>Question: Do we indicate this in the narrative only or also prepare a separate budget projecting the costs with start-up for a county(ies) not currently served? | Indicate this in the narrative and prepare a separate budget projection for a county(ies) not currently serviced; such as a population based estimate with cost projections of start up and ongoing costs to provided service in a new area.   |
| 5.              | 5               | 1.2                   | Page 5, sixth paragraph: " .....service costs incurred which includes case management services, as well as 7% service coordination costs...."<br>Question: Does this mean the base per billable hour rate for service coordination plus 7%?   | Yes, include the cost plus 7%  |

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| 6               | 9               | 3.4                   | Page 9, last section, 3.4 Salaries: "...overhead up to a maximum of 10% related to allowable administrative funding to <u>hire</u> staff." Question: The 10% administrative costs are only related to hiring staff? Please explain this sentence a bit more. | Salaries that are identified in the application must be specifically related to completing obligations set forth in the proposal.  |
| 7.              | 5               | 1.2                   | Does the \$5.6 million (mentioned in Section 1.2) include the cost for provider services   | <p>As stated in Section 1.2 of RFP#G1665-DLTC-BC "Funds may only be used for services for persons eligible for CLTS Waivers that are specified in an approved Individual Services Plan and reside in qualifying settings that include a private residence or licensed foster home for children. Earnings shall be reduced by the full amount of the per diem rate for any day a participant receives Medicaid (MA) funded services in an inpatient setting. Such settings include general hospitals, State Nursing Facilities (SNF) Institutional Care Facilities (ICF), Institutional Care Facilities for the Mentally Retarded (ICF-MR) or a State Mental Health Institute (MHI). Funds cannot be used to cover any portion of room and board expenses for participants except when the cost of room and board is an integral but subordinate part of covered respite care services when such care is provided outside of the participant's home.</p> <p>The amount of funds earned is determined by actual allowable Medicaid Waiver service costs incurred which includes case management services, as well as 7% service coordination costs, up to the maximum amount allowed by the contract including matching funds required by the contract. The amount earned is subject to upward revision if funds can be reallocated from other service agencies.</p> |
| 8.              | 5               | 1.2                   | Is the \$5.6 million state funds alone? Or does it include the federal match?  | Yes, this includes the federal match.  |
| 9.              | 15, 23          | 6.1                   | Should we use the exact "Detailed Budget Request Page" included in the RFP (write our figures on this form), or could we create our own form that includes the same information stated on this form?   | Proposers may create their own form that includes the same information stated on this form.  |