



STATE OF TENNESSEE
Department of Correction

REQUEST FOR PROPOSALS # 32901-31266 AMENDMENT # 13 FOR INMATE BEHAVIORAL HEALTH SERVICES

DATE: August 19, 2022

RFP # 32901-31266 IS AMENDED AS FOLLOWS:

1. This RFP Schedule of Events updates and confirms scheduled RFP dates. Any event, time, or date containing revised or new text is highlighted.

| EVENT | TIME (central time zone) | DATE |
|--|-----------------------------|---|
| 1. RFP Issued | | September 10, 2021 |
| 2. Disability Accommodation Request Deadline | 2:00 p.m. | September 20, 2021 |
| 3. Pre-response Conference | 1:00 p.m. | September 21, 2021 |
| 4. Notice of Intent to Respond Deadline | 2:00 p.m. | September 22, 2021 |
| 5. Written "Questions & Comments" Deadline | 2:00 p.m. | September 27, 2021 |
| 6. State Response to Written "Questions & Comments" | | May 27, 2022 |
| 7. Deadline for Clarifications/Second Round Written Questions & Comments | 2:00 p.m. | June 10, 2022 |
| 8. State's Response to Clarifications/Second Round Written Questions & Comments | | August 19, 2022 |
| 9. Response Deadline | 2:00 p.m. | September 29, 2022 |
| 10. State Completion of Technical Response Evaluations | | October 31, 2022 |
| 11. State Opening & Scoring of Cost Proposals | 2:00 p.m. | November 1, 2022 |
| 12. State Conducts Cost Negotiations | | November 2-4, 2022 November 7-10, 2022 |
| 13. State Notice of Intent to Award Released <u>and</u> RFP Files Opened for Public Inspection | 2:00 p.m. | November 14, 2022 |
| 14. End of Open File Period | | November 21, 2022 |

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| 15. State sends contract to Contractor for signature | | November 22, 2022 |
| 16. Contractor Signature Deadline | 2:00 p.m. | December 1, 2022 |
| 17. Performance Bond Deadline | 4:30 p.m. | December 21, 2022 |

2. State responses to questions and comments in the table below amend and clarify this RFP.

Any restatement of RFP text in the Question/Comment column shall NOT be construed as a change in the actual wording of the RFP document.

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| | | 1. How many computers are currently on the state's network and subject to the \$63 per month per computer charge to the vendor? | Currently there are 170 computers which have been provided by the Contractor. |
| | | 2. Does the Medical Contractor currently provide Medication for the Use of Opioid Disorders (MOUD)? If not, is it your intent to provide such a program in the future? | Yes. TDOC does currently provide Medicated Assisted Treatment (MAT). It is currently limited to offenders coming through withdrawal unit and female offenders. The State anticipates the awarded vendor to staff this unit and support future MAT program expansion. |
| | | 3. A.26 d. Psychiatric Services, on page 35 states: "For Inmates who have not previously received psychiatric medication and are requesting services, a psychological assessment shall be conducted using a standardized, reliable and valid testing tool." We understand the Department is now requiring psychological testing for patients being considered for psychotropic medication who are not currently or previously on psychotropic medication. We note that the cost of the psychological test materials will be new costs to the contract and that additional psychology positions will be needed to meet the demand caused by this new service requirement. Can the Department clarify or provide additional insight regarding the expected timeframes for completion of psychological testing when a patient is referred for consideration of psychotropic medication or | <p>The State requires a basic psychiatric assessment – a mental status exam using the State's CR-4180 form. The State is not requiring any additional psychological tests.</p> <p>The State does not see the need for extra psychology staff to meet this requirement.</p> <p>The testing does not have to be administered by a Psychologist.</p> <p>The State allows seven (7) days for the completion of intake. The intake Nurse makes referrals to Behavioral Health. A provider has seven (7) days from intake to see any offender referred for Behavioral Health Services. This is the same timeframe for any new referral for Behavioral Health.</p> <p>The provision is being revised as detailed in item 3 below.</p> |

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| | | requesting psychiatric medication services? | |
| | | 4. A.28 c. Psychological Services, on page 37, and Audit Item #13 on Attachment Three indicates that: "...Contractor shall ensure that psychologists shall provide special education evaluations." Will the Department confirm it will allow the Contractor to use School Psychologists and Senior Psychological Examiners to complete Special Education Evaluations, as these services are allowed to be performed by School Psychologists and Psychological Examiners under their licensure provisions? | A School Psychologist and a Senior Psychological Examiner would meet the state's qualifications to conduct the complete special education evaluations. |
| | | 5. Please provide any data (e.g., volume, type, frequency) on educational testing completed and IEP services provided during a recent period of time (e.g., three years). | Between 5 and 7 psychological evaluations for educational purposes are requested per year. In terms of IEP services, contractor staff attend IEP meetings and provides insight when needed on current medications for students. The State does not have data on volume or frequency related to IEP services. Occasionally, contractor staff complete an assessment form for emotional disturbance. |
| | | 6. A.26 d. Psychiatric Services, on page 35 states: "For Inmates who have not previously received psychiatric medication and are requesting services, a psychological assessment shall be conducted using a standardized, reliable and valid testing tool." Does the current intake process and the associated required documentation meet this new expectation? | This is not a new expectation and is part of the State's current intake process, using CR-4180. The CR-4180 form is a TDOC approved document, and is not a standardized tool. The CR-4180 form is a questionnaire used by TDOC for psychological assessments done at intake and includes psychiatric medication needs or any needed Behavioral Health services. The provision is being revised to reflect this clarification as detailed in item 3 below. |
| | | 7. The RFP narrative regarding required staff for SUD treatment programs and recovery services does not | Attachment Five --the Required Minimum Staffing Pattern is being revised to move a LADAC from the |

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| | | <p>match the Required Minimum Staffing In Attachment 5 of the RFP at Lois M. DeBerry Special Needs Facility and Northeast Correctional Complex. Please clarify the Department's staffing requirements for these two facilities.</p> | <p>former NECX Carter County Annex to DSNF and as detailed in item 4 below.</p> <p>Pro Forma Contract Section A.32.e. is being revised to reflect the revision in item 7 below.</p> |
| | | <p>8. WTRC was re-missioned as an intake facility over a year ago, which required adjustments to the mental health staffing pattern to meet the clinical intake services needs. Will WTRC continue to be an intake facility? If so, will the Department adjust the minimum staffing requirements in the RFP to reflect the increased staffing needs at WTRC due to the facility's mission change?</p> | <p>Attachment Five -- the Required Minimum Staffing Pattern is being revised to move a LADAC from the former Carter County Annex to DSNF as detailed in the State's response to Question 7 above and as detailed in item 4 below.</p> <p>The State envisions WTRC remaining an intake facility at this time. The State may, however, elect to re-mission any facility if additional needs become evident in the future, and such a re-missioning is determined to be in the best interest of the State. If this takes place, the State and the Contractor could revisit the staffing pattern and needs at specific facilities.</p> <p>Please revisit Pro Forma Contract Section A.24, which addresses Contract Staffing. A relevant portion of that provision is included here for convenience:</p> <p>If a change in circumstances calls for a modification in the staffing requirements of this Contract, the Contractor and the State shall review those changed circumstances and a formal review shall determine any changes in staffing requirements at the sole discretion of the State.</p> |
| | | <p>9. The RFP minimum staffing requirements indicate a 1.0 BHA position at DSNF. This position is currently funded by the Contractor, but the employee in the position is actually a TDOC employee. Does TDOC anticipate this scenario continuing under the new contract, with the Contractor funding the position for the TDOC to employ, or does the TDOC intend for this employee to</p> | <p>If the TDOC employee elects to continue as a State employee, the position will continue to be funded by the Contractor and the salary paid by the Contractor. If the employee retires or leaves the position, , the contractor will be required to fill the now-vacant position.</p> |

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| | | convert to a Contractor position? | |
| | | 10. Please provide any information available regarding the bandwidth capabilities and status for each of the WAN connected facilities. | <p>The State adjusts the bandwidth on the state network to meet the demand of computer use. Currently the state network (for computer use) is 150 or 200 mb at most prisons.</p> <p>The video conference network is provided by the contractor, so we are not aware of the bandwidth.</p> |
| | | 11. Is there a list of network connection types and bandwidth per facility? If so, please provide. | <p>The State adjusts the bandwidth on the state network to meet the demand of computer use. Currently the state network (for computer use) is 150 or 200 mb at most prisons.</p> <p>The video conference network is provided by the contractor, so we are not aware of the bandwidth.</p> <p>There is no list of connectivity types.</p> |
| | | 12. Are any of the facilities not connected to the WAN? If so, which facilities? | All prisons are connected to the State network to provide connectivity for computers.. |
| | | 13. Are the Contractor's staff PC's on a separate network (or VLAN) other than DOC owned end-points? | The Contractor's computers are on the same network as the State computers. |
| | | 14. Is the medical contractor responsible for providing any of the switching infrastructure serving the contractor's PC or Telehealth equipment? | <p>On the State computing network, all switching is provided by the State.</p> <p>On the video conferencing network which is provided by the contractor, everything (ISP, switching, etc.) is provided by the Contractor except for the State-provided fiber backbone between buildings.</p> |
| | | 15. Is the Department open to the idea of the Contractor installing their own isolated network separate from the Department's network to serve the Contractor's end points? | The State would consider the option of the contractor's computers being on the contractor provided network but that would not provide access to the state jail management system (TOMIS). |
| | | 16. Are there any existing VPN or other connections between the Department's network and the Contractor's network? | There are no existing VPNs or other connections between the State's network and the Contractor's network. |
| | | 17. Are the Department provided phones for Contractor staff VOIP phones? If so, are the phones and PC's at staff | The State provides the VOIP phones so that medical staff can call the other phones at a prison |

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| | | desks for the most part daisy chained or independently network connected? | facility without having to dial into the phone system. In most cases, phones are plugged into the wall computer drop, and one computer is plugged into a phone. |
| A | | 18. On what domain are the Contractor's PCs installed? | The Contractor's computers are located on the same domain as the other State computers. |
| | | 19. Are there any PC hardware specification minimum requirements, restrictions, limitations, or brand/preferences that bidders should be aware of? | The Contractor must purchase the same brand and model that the State purchases so that the State can install the standard State image on the computers. Currently that model is Dell OptiPlex 3080 / 3090 Desktop. |
| | | 20. Is the existing PC and/or printing hardware available for a new incoming contractor staff to use? If so, is there a listing of warranty (replacement) dates for all end-points? | A list of current contractors provided computers is being added as Attachment Nineteen as detailed in item 6 below. All computers currently must have at a minimum the Windows 10 operating system. |
| | | 21. What is the average age of the computers in use? | The average age of computers in use is four years or less OR the computer is in the process of being replaced. |
| | | 22. Approximately how many computers will the Contractor be responsible for? | The current Contractor is responsible for 170 computers. That number could increase if the Contractor decides there is a need for more. |
| | | 23. Are there any Thin Clients used by Contractor staff? | There are no thin clients used by Contractor staff. |
| | | 24. Approximately how many desktop printers will the Contractor need? | The State does not possess this information, which is determined by the current contractor. |
| | | 25. How many large format (MFP type) printers should bidders anticipate needing (i.e., how many in use today?)? | The State is not aware of any large format (MFP type) printers in use. |
| | | 26. Does the Department have a process to allow contractors to install software (i.e., support tools) on Agency imaged PC's or request internet site whitelisting? | No such process exists. Additionally, The State would not allow software from the Contractor to be installed. |
| | | 27. Is there any connectivity between the TH network and the Department's network or is it completely isolated? | There is no connection between the state network and the contractor provided tele health network. |

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| | | 28. How many Telehealth systems exists across the contract? Is there a breakdown by location that can be provided? | <p>The State is aware of the following: NWCX – 2, WTSP – 2, WTRC – 2, MLTC – 1, TCIX main – 1, TCIX annex –1, RMSI – 1, DSNF –1, DJRC – 2, BCCX – 2, MCCX – 2, NECX –1.</p> <p>There may be others of which the State is unaware.</p> |
| | | 29. Is there a list of Department applications, file services, or other resources are accessed by contractor staff? | The State provides access to the State's offender management system (TOMIS). |
| | | 30. A.6: This section references upgrades to phones and/or computer systems being the responsibility of the contractor. What is the current make/model/rev of each? | <p>The State provides the VOIP phones at no cost to the contractor so that medical staff can call the other phones at the prison without having to dial into the phone system.</p> <p>The current computer model being purchased is Dell OptiPlex 3080 / 3090 Desktop.</p> |
| | | 31. A.7: This section references videoconferencing equipment. What is the current make/model/rev per site or will the contractor be responsible for replacing what is currently in use? | The list in question # 20 are all currently being replaced. The current model being purchased is an all-in-one cart solution. |
| | | 32. A.7: This section references upgrades to phones and/or computer systems being the responsibility of the contractor. What is the current make/model/rev of each? | <p>The State provides the VOIP phones at no cost to the contractor so that medical staff can call the other phones at the prison without having to dial into the system.</p> <p>The current computer model being purchased is Dell OptiPlex 3080 / 3090 Desktop.</p> |
| | | 33. Appendix A (Section G): Regarding the computer loaded with Radiology software for viewing images. Are there any specifications to that computer? | <p>The current computer in use is Dell OptiPlex 3080 / 3090 Desktop.</p> <p>Please see State's Response to Question 19.</p> |
| | | 34. Reference PDF page 63, A.8. Behavioral Health Coverage The Contractor shall ensure that Behavioral Health staff are available | Contractor staff should be both on-call and physically on-site to provide minimum coverage on weekends and evenings in keeping with the |

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| | | <p>and staffed for weekend and evening shifts at the discretion of Director of Behavioral Health.</p> <p>a. Please confirm current weekend and evening shifts worked by behavioral health staff by position and facility.</p> | <p>staffing matrix/pattern as dictated by the State and as needed.</p> |
| | | <p>35. Reference PDF page 134, Attachment Four – Key Performance Indicators Manual</p> <p>Inmates who are placed in restrictive housing for thirty (30) consecutive days shall be afforded a Clinical assessment within the initial thirty (30) days of placement, and every ninety (90) days thereafter as referenced in Section A.32.m.2.</p> <p>a. The reference to ninety (90) days in Section A.32.m.2 is specific to substance use disorder treatment plan reviews. Please confirm that clinical assessments of patients in restrictive housing should be provided every thirty (30) days following the initial thirty (30) day review, as stipulated on page 134, Indicator: (d).</p> | <p>Inmates on the Mental Health caseload who have had clinical assessments before placement in Restrictive Housing must be checked within 72 hours of placement in Restrictive Housing. The first review must take place thirty (30) days later, and further reviews must follow every thirty (30) days as long as the inmate remains in Restrictive Housing.</p> |
| | | <p>36. Reference PDF page 144, Attachment Seven – Population Projections:</p> <p>a. Please provide an updated Attachment Seven if available.</p> | <p>At this time, there is no update available. The State anticipates an update may be available at contract signing.</p> |
| | | <p>37. Reference PDF page 164, Attachment Ten – TDOC Staff Eligible to Transition:</p> <p>a. Please provide an updated Attachment Ten if available.</p> | <p>An updated Attachment Ten is being provided as detailed in item 5 below.</p> |
| | | <p>38. Reference Amendment #12 and attachments:</p> <p>a. Please provide a single, complete, updated RFP document.</p> | <p>All revisions to the RFP and Pro Forma contract have been detailed in Amendments 1 through 13 and have been noted by highlighting to indicate the changes. The State does not anticipate issuing a Release 2 with all revisions so incorporated at this time. Additionally updated Sections A and B as well as updated Attachment 6.4 were provided as standalone clean copies as part of Amendment 12's release.</p> |
| 26 | A.7 Telepsychiatry | <p>39. In A.7, section a., it is stated "The Contractor shall ensure that Telepsychiatry videoconferencing equipment shall meet the standards promulgated by the American Telemedicine Association</p> | <p>The State's video conferencing equipment is Tanberg.</p> |

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| | | (https://www.americantelemed.org/), utilize IP Transport, and fully interact with TDOC's current videoconferencing systems." Please provide make and models of TDOC's current videoconferencing systems. | |
| 50 | A.33 Reporting Requirements; d. Data Management Automation | 40. The initial responses to questions (page 9) notes that the Department is in the process of procuring an electronic health record. Can TDOC advise the steps completed and current status of that procurement? | A procurement for Electronic Health Records system is still in development, at this time the State does not have firm dates regarding it's release. |
| | Attachment Seven | 41. Can the TDOC please provide updated population projections starting with June 2022 and going out 2- 3 years, with clear segregation between TDOC and privately run prisons? | At this time, there is no update available. The State anticipates an update may be available at contract signing. |
| 3 | Amendment #12, Question 15 Response 15a | 42. The following response was provided by TDOC: 15.a. The current RFP's Staffing Pattern differs from and does not reflect or have any bearing on the Staffing Pattern in the current RFP and subsequent contract. It has been revised and additional FTEs have been added. The best evaluated proposer for this solicitation will be required to meet the Minimum Staff Requirements detailed in the RFP. Please clarify the duplicate references to the current RFP's staffing, as the original question requested a comparison between the current BH vendor contract and RFP Attachment Five staffing. | The State will NOT provide any such comparison. Attachment Five – the Minimum Staffing Requirements as revised by this amendment (and as detailed in item 4 below) will serve as the staffing requirements for the awarded contract unless further amended by the State during this procurement process. The staffing matrix for the State's current Behavioral Health contract has no bearing on the staffing matrix for this procurement. |
| | Attachment Five | 43. REVISED Attachment Five staffing issued with Amendment #12 does not appear to be different than Attachment Five issued with the original RFP. Please confirm that no changes have been made to the minimum staffing required in Attachment Five from September of 2021. If the original Attachment Five is no longer the minimum staffing, please provide a revised Attachment 5 AND requested changes by job title and facility. | Attachment Five has been updated as detailed in item 4 below. |
| 66 | Amendment #12 Section A.37 Employee Transition Process | 44. Upon contract execution, does the successful behavioral health have any obligation to reimburse TDOC for salaries (and benefits) of any remaining TDOC BH staff that choose not to transition to the behavioral health vendor (i.e. six positions)? | The contractor must make an offer of employment to the State employees proving behavioral health services as stated in Pro Forma Contract Section A.36. If said employees do not accept the Contractor's offer(s) of employment and elect to remain with the State, |

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| | | | <p>the Contractor is required to reimburse the State so as to pay the salaries and benefits of the TDOC staff who remain in those positions.</p> <p>The number of State employees providing Behavioral Health services is being updated as detailed in item 5 below.</p> |
| 66 | Amendment #12 Section A.37.b Employee Transition Process | 45. Please confirm that any “vacant behavioral health state positions” that transitions to the contractor are already included within Attachment 5 minimum requirements, regardless if the transition is prior to or after contract start date. If not, please identify facility, titles and # of FTEs per title that need to be added to the minimum staffing. | All current vacant positions are reflected in the staffing pattern. |
| | | 46. Amendment #12 revised the Reference Questionnaire Form to include the option for agencies to email their completed reference questionnaire directly to you. As we value the time of our agency partners, please confirm that agencies submitting the form directly to the Department via email will not also have to return a hardcopy in a sealed envelope to the respondent for submittal with the proposal response. | If the reference questionnaires are returned to the State via e-mail, it is not required for hardcopies to be included as part of a proposal. |
| | | Gender dysphoria is not mentioned in the contract. | <p>Every facility has a multi-disciplinary team for gender dysphoria that meets quarterly. The State’s expectation is that the awarded vendor shall provide psychological evaluations as outlined by the State’s gender dysphoria policy. Determination of gender dysphoria will include cognitive, and objective assessment. One of the Contractor’s psychologists should be equipped to do testing.</p> <p>Please refer to TDOC Policy #113.37, which was among policies initially included/released as part of RFP in Exhibit B.</p> |

3. Delete Pro Forma Contract Section A.2.6.d. in its entirety and replace with the following:

- A.26.d. For Inmates who have not previously received psychiatric medication and are requesting services, a psychological assessment shall be conducted using the State’s CR-4180 form. The Contractor shall place all documentation required by this section in the medical record of the patient as referenced in Appendix B TDOC Policies #113.50 and #113.89.

4. **Delete RFP Attachment Five in its entirety and replace it with the Revised Attachment Five.**

5. **Delete RFP Attachment Ten in its entirety and replace it with the Revised Attachment Ten.**

6. A listing of computers provided by the Contractor as detailed in the State's Response to Question 20 is being added as Attachment Nineteen.

7. Delete Pro Forma Contract Section A.32.e. in its entirety and replace with the following:
 - a. The Contractor shall provide SUD treatment programs and recovery services at the following facilities:
 1. **Bledsoe County Correctional Complex.**
 One hundred and seventy-four (174) beds, one hundred and four (104) male MTC beds, fifty (50) male protective custody co-occurring Therapeutic Community beds, and twenty (20) female Intensive SUD Group Therapy beds.

 Required Contractor staffing: Two (2) LADAC and six (6) non-licensed alcohol and drug abuse counselor interns and one (1) LCSW (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).
 2. **Lois M. DeBerry Special Needs Facility.**
 Fifteen (15) Beds and fifteen (15) male Intensive SUD Group Therapy beds.

 Required Contractor staffing: **Two (2) LADACs** (full-time position or the equivalent working standard week of thirty-seven and one half (37.5) hours (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).
 3. **Morgan County Correctional Complex.**
 One hundred and nineteen (119) beds, one hundred and four (104) MTC beds, and fifteen (15) Intensive SUD Group Therapy beds.

 Required Contractor staffing: Two (2) LADAC and six (6) non-licensed alcohol and drug abuse counselor interns (full-time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).
 3. **Mark L. Luttrell Correctional Complex.**
 Twenty (20) beds and twenty (20) Intensive SUD Group Therapy beds.

 Required Contractor staffing: One (1) LADAC (full-time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).
 4. **Northeast Correctional Complex.**
 Forty (40) beds, twenty (20) Intensive SUD Group Therapy Main Compound beds and twenty (20) SUD Group Therapy beds in the Carter County Annex Transition Center.

 Required Contractor staffing: One (1) LADAC and three (3) non-licensed alcohol and drug abuse counselor intern (full time position or the equivalent working standard week of thirty-seven and one half (37.5) hours).
 5. **Northwest Correctional Complex.**

One hundred and ninety-six (196) beds, one hundred and sixty-one (161) MTC beds, fifteen (15) Intensive SUD Group Therapy beds and twenty (20) SUD Group Therapy beds in the veterans unit.

Required Contractor staffing: Two (2) LADACs and seven (7) non-licensed alcohol and drug abuse counselor interns (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).

6. Riverbend Maximum Security Institution.

Twenty (20) beds and twenty (20) Intensive SUD Group Therapy beds.

Required Contractor staffing: One (1) LADAC (full time position or the equivalent working standard week of thirty-seven and one half (37.5) hours).

8. Debra K Johnson Rehabilitation Center.

Ninety-four (94) beds, sixty-four (64) MTC beds, and thirty (30) Intensive SUD Group Therapy beds.

Required Contractor staffing: One (1) LADAC and five (5) non-licensed alcohol and drug abuse counselor intern (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).

9. Turney Center Industrial Prison Complex (TCIX Annex 2-Wayne County, Clifton Tennessee)

One hundred and seventy-five (175) beds, eighty (80) MTC beds, fifteen (15) Intensive SUD Group Therapy beds, fifty (50) parole technical violator program Intensive SUD Group Therapy beds, fifteen (15) probation technical violator program Intensive SUD Group Therapy, and fifteen (15) Boot Camp Intensive SUD Group Therapy.

Required Contractor staffing: Three (3) LADACs and eight (8) non-licensed alcohol and drug abuse counselor interns (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).

10. Women's Therapeutic Residential Center West Tennessee State Prison Site 1

One hundred and forty-three (143) beds, one hundred and twenty-eight (128) MTC beds, and fifteen (15) Intensive SUD Group Therapy beds.

Required Contractor staffing: Two (2) LADAC and ten (10) non-licensed alcohol and drug abuse counselor interns (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).

11. Men's Residential Center West Tennessee State Prison Site 2

Five hundred and twelve (512) beds, one hundred and twenty-eight (128) MTC beds, three hundred and eighty-four (384) Intensive SUD Group Therapy beds, interventions, Aftercare, family reunification, and peer recovery services.

Required Contractor staffing: Two (2) LADACs and nine (9) non-licensed alcohol and drug abuse counselor interns, one (1) program administrator, and (1) counselor with a master's degree (full time positions or their equivalents working standard week of thirty-seven and one half (37.5) hours).

8. The State adds the letter labeled as Attachment 1 as an attachment to this Amendment only.
9. **RFP Amendment Effective Date**. The revisions set forth herein shall be effective upon release. All other terms and conditions of this RFP not expressly amended herein shall remain in full force and effect.

A respondent raised an issue about the need for the performance bond requirement for RFP 32901-31266 as well as the Notice of Intent to Respond Deadline.

Concerning the Notice of Intent to Respond deadline, it is not a requirement for respondents to submit a response to the RFP. Respondents that submitted a Notice of Intent to Respond are not required to respond, and respondents who did not submit a notice of intent to respond are not precluded from submitting a response to the RFP.

Regarding concerns about the Performance Bond, the bond covers the cost of substitute performance, should the contractor fail to perform its duties under the contract. In addition, the use of a performance bond is not limited strictly to the construction industry but, may be required and underwritten in any contract to hold a contractor accountable when performance obligations are not met. The services expected to be performed under this contract require a performance bond to protect the State against a critical failure under the contract that would jeopardize the State's duty to provide the services to the inmates in accordance with federal and state law. The Performance Bond required in the contract resulting from the RFP assures that the terms of the contract will be completed, that performance will be in accordance with contract requirements and standards, that performance will be timely, and that any subcontractors will be paid.