STATE OF FLORIDA

DEPARTMENT OF CHILDREN AND FAMILIES

REQUEST FOR PROPOSAL

DCF RFP 2324 081

QUALIFIED EVALUATOR NETWORK (QEN)

TABLE OF CONTENTS

SECTION 1. INTRODUCTION 3

1.1 Purpose of the Procurement 3

1.2 Timeline 3

1.3 Term 4

1.4 Procurement Officer and Communication 4

SECTION 2. SOLICITATION PROCESS 4

2.1 General Overview of the Process 4

2.2 Vendor Questions 4

2.3 Official Notices and Addenda 5

2.4 General Response Information 5

2.5 Trade Secrets and Respondent Claims 7

2.6 Department not Obligated to Defend Vendor Claims 7

2.7 Public Opening 7

2.8 Department's Discretion 7

2.9 Protests 8

2.10 Supporting Documentation 8

SECTION 3. GENERAL CONTRACT INFORMATION 8

SECTION 4. INSTRUCTIONS FOR RESPONDING TO THE SOLICITATION 8

4.1 How to Submit a Response 9

4.2 Response Structure 9

4.3 Content of the Financial Response 11

SECTION 5. THE SELECTION METHODOLOGY 12

5.1 Selection Criteria 12

5.2 Evaluation Phase Methodology 12

APPENDIX I: CERTIFICATE OF SIGNATURE AUTHORITY 18

APPENDIX II: RESPONDENT'S CERTIFICATIONS 20

APPENDIX III: VENDOR QUESTIONS 23

APPENDIX IV: SUBCONTRACTOR LIST 24

APPENDIX V: COST PROPOSAL 25

APPENDIX VI: BUDGET SUMMARY AND DETAIL INSTRUCTIONS 26

APPENDIX VII: PROJECT BUDGET SUMMARY 28

APPENDIX VIII: PROPOSED ANNUAL PAYMENT TABLE 30

SECTION 1. INTRODUCTION

1.1 Purpose of Procurement

In accordance with Chapter §287, Florida Statutes (F.S.), the State of Florida, Department of Children and Families (Department), Office of Child and Family Well-Being issue this Solicitation to select a Respondent(s) to provide the development and management of a network of Qualified Evaluators (QE). These QEs will make up the Department's Qualified Evaluator Network (QEN). The QEN will identify QEs who are able to perform assessments on children in the care and custody of the Department, and who are being placed or are already in a residential treatment facility.

The selected Respondent shall provide commodities and contractual services that meet the requirements of the Department's **Standard Contract and Standard Contract Part 2.** Any Respondent interested in participating must comply with the terms of this solicitation. By responding to this solicitation, Respondents agree to all terms, conditions, and requirements herein.

The terms "Contract", "agreement", and "purchase order" may be used interchangeably throughout this document, all related attachments, exhibits, and referenced documents. These terms collectively refer to the services, terms, and conditions to provide the goods, services, and/or solution that meet the requirements of the Contract**,** between the Department and the selected Respondent.

1.2 Timeline

The table below contains the official Timeline for this Solicitation (all times are Eastern Time). Dates and times notated with "Anticipated", are subject to change. It is the responsibility of the Respondent to check for any changes on the Department of Management Services' (DMS) Vendor Information Portal (VIP).

Activity	Date	Time	Address
Solicitation Advertised:	07/14/2026	N/A	https://vendor.myfloridamarketplace.com/
Written Questions Deadline:	07/28/2026	10:00 a.m.	See Section 1.4
Anticipated Department's Answers to Questions:	08/11/2026	N/A	https://vendor.myfloridamarketplace.com/
Response Deadline:	08/25/2026	10:00 a.m.	See Section 1.4
Public Response Opening:	08/25/2026	2:00 p.m.	**Please join my meeting from your computer, tablet or smartphone.** https://meet.goto.com/654295517 **You can also dial in using your phone.** Access Code: 654-295-517 United States: +1 (872) 240-3212 **Get the app now and be ready when your first meeting starts:** https://meet.goto.com/install
Anticipated Posting of Award:	11/02/2026	N/A	https://vendor.myfloridamarketplace.com/

1.3 Term

The anticipated start date of the resulting Contract is January 1, 2027. The anticipated duration of the Contract is three years after the start of service. Renewal, if any, shall comply with §287.057(14), F.S.

1.4 Procurement Officer and Communication

The sole contact point for communication (which will only be accepted in writing) regarding this solicitation is:

Sally Johns
Procurement Officer

Sally.Johns@myflfamilies.com , and CC: hqw.procurement.team.activities@myflfamilies.com

In accordance with §287.057(25) F.S., "Respondents to this solicitation or persons acting on their behalf may not contact, between the release of the solicitation and the end of the 72-hour period following the agency posting the notice of intended award, excluding Saturdays, Sundays, and state approved holidays, any employee or officer of the executive or legislative branch concerning any aspect of this solicitation, except in writing to the Procurement Officer or as provided in the solicitation documents. Violation of this provision may be grounds for rejecting a Response."

Any information received through oral communication shall not be binding on the Department and shall not be relied upon by a Respondent. **All emails to the Procurement Officer shall contain the solicitation number and title in the subject line and be sent to both email addresses listed above.**

SECTION 2. SOLICITATION PROCESS

2.1 General Overview of the Process

Responses from responsible and responsive Respondents are eligible for evaluation. By submitting a Response, the Respondent agrees to each of the certifications listed in this solicitation unless otherwise indicated.

If the Department receives less than two (2) responsive Responses, the Department may negotiate on the best terms and conditions, pursuant to §287.057(6), F.S.

The Department may request Respondent presentations.

2.2 Vendor Questions

2.2.1 Vendor questions for which binding Department answers are desired must be sent to the email addresses provided in **Section 1.4**. Questions shall be received by the Procurement Officer on or before the date and time specified in **Section 1.2**.

2.2.2 Vendors should read the solicitation and all attachments in whole prior to submitting questions.

2.2.3 The Department requests that all questions have the solicitation number in the subject line of the email.

2.2.4 The Department requests all questions be submitted at once, rather than in multiple communications.

2.2.5 The Department's answers to written questions will be issued via an addendum and posted to VIP with this solicitation.

2.2.6 Questions are requested to be submitted on or in the same format as **Appendix III, Vendor Questions.**

2.2.7 It is the sole discretion of the Department to consider questions received after the written questions submission deadline.

2.2.8 The Department will not accept questions by telephone, postal mail, hand delivery, or fax.

2.2.9 Questions must include at minimum, the following information:

2.2.9.1 Vendor Name;

2.2.9.2 Section reference pertaining to the question.

2.3 Official Notices and Addenda

All notices, decisions, intended decisions, addenda, and other matters relating to this solicitation will be posted on the VIP located at: https://vendor.myfloridamarketplace.com/

2.3.1 The Department reserves the right to modify this solicitation by addenda. Addenda may modify any aspect of this solicitation. Any addenda issued will be posted on the VIP.

2.3.2 The Department bears no responsibility for any resulting impacts associated with a Respondent's failure to obtain the information made available.

2.4 General Response Information

2.4.1 Receipt of Responses

2.4.1.1 Responses shall be submitted to the Department electronically to the Procurement Officer and email addresses listed in **Section 1.4**. Responses must be received by the Procurement Officer no later than the date and time specified in **Section 1.2**. Responsibility for timely delivery rests with the Respondent. Respondents should fully acquaint themselves with all aspects of this solicitation to ensure the work is performed in accordance with the terms and conditions herein. No allowances will be made to the selected Respondent due to a lack of knowledge about conditions or requirements nor will the selected Respondent be relieved of any liabilities or obligations.

2.4.1.2 The electronic submission must comply with the following requirements:

2.4.1.2.1 The Response must be attached to the email. The Department will not log in to any websites or click on links due to security risks associated with this action.

2.4.1.2.2 The Response must be free of malware. Any infection resulting to the Department's systems shall be addressed to the Department's satisfaction at the Respondent's expense.

2.4.1.2.3 The software used to produce the electronic file must be in Adobe portable document format ("pdf"), version 6.0 or higher.

2.4.1.2.4 The Department must be able to open and view the Response utilizing Adobe Acrobat.

2.4.1.2.5 In the event that the electronic file attachment is too large to be submitted in a single email, the Respondent may utilize multiple emails so long as all required documents are delivered on, by, or before the date and time

specified in **Section 1.2**. The Department can allow up to 100 MB for incoming attachments. The Respondent email system must also allow for a 100 MB attachment. Zipping attachments will reduce file sizes.

2.4.2 Format

Figures, charts, and tables should be numbered and referenced by number in the text. Attachments may be combined with the Response or included as separate attachments. It is understood that the Response will become a part of the Department's official procurement file.

2.4.3 Unrequested Terms and Conditions

The Department will not accept any unrequested terms or conditions submitted by a Respondent, including any appearing in documents attached as part of a Respondent's response. In submitting its Response, a Respondent agrees that any additional terms or conditions, whether submitted intentionally or inadvertently, shall have no force or effect. All Responses are subject to the terms of this solicitation, which, in case of conflict, will have the order of precedence listed in **Section 3.1.**

2.4.4 Cost of Preparation of Response

The Department will not pay any costs incurred in responding to this solicitation.

2.4.5 Clarifying Information

The Department may request, and Respondent shall provide, clarifying information or documentation. Failure to supply the information or documentation as requested may result in the Response being deemed non-responsive.

2.4.6 Response Withdrawal and Amendment

Respondents may withdraw, or withdraw and replace, previously submitted electronic Responses on or before the date and time specified for Responses to be received by the Department.

2.4.7 Firm Response

The Response shall remain firm until the Department enters into a Contract or the Department receives written notice from the Respondent that the Response is withdrawn.

2.4.8 General Instructions

The standard "General Instructions to Respondents" Form PUR 1001 is hereby incorporated into this solicitation by reference as if fully recited herein. In the event of any conflict between Form PUR 1001 and this solicitation, the terms of this solicitation shall take precedence over Form PUR 1001, unless the conflicting term is required by Florida law, in which case the term contained in Form PUR 1001 shall take precedence. Form PUR 1001 is available at: State Purchasing (PUR) Forms / State Agency Resources / State Purchasing / Business Operations - Florida Department of Management Services (myflorida.com)

2.4.9 Notice to Vendors – Prohibition on Social, Political, or Ideological Considerations

Pursuant to §287.05701, Florida Statutes, the awarding body may not request documentation of or consider a Vendor's social, political, or ideological interests when determining if the Vendor is a responsible Vendor, nor give preference based on such interests.

2.4.10 Commitment to Diversity

The State strongly supports its diverse business population through involving woman-, veteran-, and minority-owned business enterprises in the state's purchasing process. The Department strongly supports diversity in its procurements, and requests that all subcontracting opportunities afforded by

this Solicitation be shared with certified woman-, veteran-, and minority-owned business enterprises. The award of subcontracts should reflect the vast array of citizens in the State. Respondents can search for certified businesses online at the Office of Supplier Diversity's Certified Vendor Directory or by contacting 850-487-0915 for information on certified businesses that may be considered for subcontracting opportunities. The Certified Vendor Directory is located at: https://vendor.myfloridamarketplace.com . For questions about registering to identify your Small Business as a Woman--, Veteran--, or Minority-owned Small Businesses, visit: https://www.dms.myflorida.com/agency_administration/office_of_supplier_diversity_osd.

2.5 Trade Secrets and Respondent Claims

2.5.1 How to Claim Trade Secret Protection

2.5.2 Article 1, section 24, Florida Constitution, guarantees every person access to all public records, and §119.011, F.S., provides a broad definition of "public record." As such, the entirety of the Response is public record and is subject to disclosure unless exempt from disclosure by law. The Department defines "confidential information" as information that is trade secret as defined in §688.002, F.S., or otherwise confidential or exempt from disclosure under Florida or federal law.

2.5.3 If the Vendor considers any portion of the Response to be confidential information, the Vendor shall then submit two copies of the Response. In both copies, any portion of the Response considered confidential information shall be clearly labeled within the text of the Response as "CONFIDENTIAL". For each portion of the Response that is labeled "CONFIDENTIAL", the Vendor shall provide a written statement of the basis for exemption applicable to each provision identified by the Vendor as "confidential", including citation to a protection created by statute, and state with particularly the reasons the provision is confidential.

2.5.4 The original copy shall be unredacted and labeled on the cover of the Response as "Confidential Copy". The redacted copy shall redact all the confidential information and be labeled on the cover of the Response as "Redacted Copy".

2.6 Department not Obligated to Defend Vendor Claims

By submitting a Response, the Vendor agrees to protect, defend, and indemnify the Department for all claims arising from or relating to the Vendor's determination that the redacted portions of its Response are confidential information. If a Vendor fails to submit a Redacted Copy in accordance with this solicitation, the Department is authorized to produce the entire material submitted to the Department in response to a demand for discovery or disclosure of these records or a public records request.

2.7 Public Opening

Responses shall be opened on the date, time and location indicated in **Section 1.2**. Respondents may, but are not required to, attend. Pursuant to §119.071(1)(b), F.S., no other materials will be released. Any person requiring a special accommodation because of a disability must contact the Procurement Officer at least 48-hours prior to this Solicitation opening.

2.8 Department's Discretion

Through this Solicitation, the Department seeks Responses from responsible and responsive Respondents, as defined in §§287.012(25)–(27), F.S. The Department intends to award to the responsible and responsive Respondent(s) submitting the response(s) most advantageous to the State based on the evaluation criteria set forth in this solicitation. The Department will not accept any unrequested terms or conditions included in a Response; any such terms, whether submitted intentionally or inadvertently (including those in attachments), shall have no force or effect.

2.8.1 The Department reserves the right to:

2.8.2 Determine whether a Respondent is responsible and/or responsive;

2.8.3 Reject any Respondent whose submission, references, or current standing does not demonstrate the capability, integrity, or reliability to fully and faithfully perform the Contract requirements;

2.8.4 Reject any Response deemed non-responsive for failure to meet any Solicitation requirements, specifications, terms, or conditions, or for failing to include required information or documentation;

2.8.5 Waive minor irregularities if doing so is in the best interest of the State of Florida;

2.8.6 Withdraw the Solicitation or reject all Responses at any time;

2.8.7 Select more than one Respondent for the commodities or contractual services covered by this Solicitation;

2.8.8 Award Contract(s) for a reduced scope of goods or services than originally solicited;

2.8.9 Withdraw or amend any Notice of Intent to Award or Notice of Award.

2.9 Protests

Any protest concerning this Solicitation shall be made in accordance with §120.57(3) and 287.042(2), F.S., and Chapter 28-110, Florida Administrative Code (F.A.C.). Protest timeliness will be determined using the VIP posting time. Failure to file a protest within the time prescribed in §120.57(3), F.S., or failure to post the bond or other security required by law within the time allowed for filing a bond shall constitute a waiver of proceedings under Chapter 120, F.S. Notices of Protest must be filed with the Clerk of Agency Proceedings (Agency.Clerk@myflfamilies.com).

2.10 Supporting Documentation

This table lists the supporting documentation, and the associated link to download the supporting documentation.

Subject	Description	Link
§39.407, F.S.	Proceedings Relating to Children	2024 Florida Statutes, Judicial Branch, Proceedings Related to Children

SECTION 3. GENERAL CONTRACT INFORMATION

3.1 Solicitation Order of Precedence

In the event of a conflict between the documents included in this Solicitation, the conflict will be resolved in the following order of priority (highest to lowest):

3.1.1 Addenda to solicitation documents, if issued (in reverse order of issuance).

3.1.2 Standard Contract Part 2

3.1.3 Standard Contract

3.1.4 This Solicitation and its attachments.

3.1.5 PUR 1001, General Instructions to Respondents.

SECTION 4. INSTRUCTIONS FOR RESPONDING TO THE SOLICITATION

4.1 How to Submit a Response

4.1.1 Copies Required and Format for Submittal

4.1.1.1 The Respondent should clearly label each copy of the Response with "Confidential Copy" and "Redacted Copy" (if applicable) as described in **Section 2.5**.

4.1.1.2 The Department reserves the right to reject any Response that does not: properly address the requirements; fails to include the requested information; or deviates from the requirements of this solicitation in any manner.

4.1.2 Response Format

4.1.2.1 Electronic (email) copies of the Responses must be submitted and must be clearly marked with, the solicitation number, title, the Respondent's name, and identification of enclosed documents.

4.1.2.2 Responses should be typed, single-spaced, on 8 1/2" x 11" format. Pages should be numbered in a logical, consistent fashion. Figures, charts, and tables should be numbered and referenced by number in the text. The Response must be submitted in accordance with **Sections 4.2 and 4.3**.

4.2 Response Structure

4.2.1 Cover Page

The first page of the Response shall be a Cover Page that contains the following information:

4.2.1.1 Solicitation Number and Title.

4.2.1.2 Name, title, telephone number, email address, and mailing address of the person who can respond to inquiries regarding the Response.

4.2.1.3 Full legal name of Respondent and its associated Federal Employer Identification Number (FEIN), or Social Security Number if a FEIN is not required.

4.2.1.4 Proof of registration with MFMP.

4.2.1.5 Country and state of incorporation.

4.2.1.6 Principal place of business.

4.2.1.7 Redacted Response Statement - The Respondent shall submit a statement indicating that a Redacted Copy is included, or is not included, with the Respondent's Response.

4.2.2 Response Section 1: Table Of Contents

4.2.3 Response Section 2: Mandatory Response Documents

4.2.3.1 Signature Authority

Include a Certificate of Signature Authority (**Appendix I**), completing either Section A (or providing a corporate resolution or other duly executed certification issued in the Respondent's normal course of business) or Section B, demonstrating the person signing the Response, and its statements and certifications, is authorized to make such representations and to bind the Respondent.

4.2.3.2 Respondent Certifications

Include the Respondent Certifications Form **(Appendix II**) signed by the person named in the Certificate of Signature Authority as the Authorized

Representative of the Respondent and with “true” checked next to each of the Certifications (a) through (f).

4.2.4 Response Section 3: Executive Overview

Provide a brief Executive Overview demonstrating an understanding of the solicitation purpose and the needs specified in this solicitation. The Executive Overview includes a brief description of the Respondent’s organization, and qualifications to complete the work as outlined in the Contract**.**

4.2.4.1 Describe Respondent’s approach and philosophy, including mission statement, core values, and vision.

4.2.4.2 Disclose if the Respondent is on a current Corrective Action Plan (CAP) with the Department, in the process of being placed on a CAP, or have been on a CAP within the last 6 months due to noncompliance, nonperformance, or unacceptable performance:

4.2.4.2.1 That is determined by the Department to have a direct effect on client health and safety, or

4.2.4.2.2 that involves the provision of service not having a direct effect on client health or safety.

4.2.4.2.3 Respondents with CAPs for noncompliance because of unacceptable performance of administrative tasks may apply, but are required to report their existing CAP. In addition, a Respondent must report any current CAPs that their subcontractors have with the Department. Failure for the Respondent to report an existing CAP can disqualify a Respondent from consideration for award.

4.2.4.3 Describe the Respondent’s and subcontractor(s)' ability to successfully complete the work described in this solicitation and its appendices, attachments, exhibits, and referenced supporting documentation. The Respondent’s and any proposed subcontractor(s)’ information shall be shown separately. Describe the experience and capability to deliver its proposed services including the Respondent track record providing services similar to the requirements of the solicitation.

4.2.5 Response Section 4: Core Team Qualifications

4.2.5.1 The Respondent shall describe the qualifications and credentials of their leadership team with an explanation of why the leadership team is qualified to lead their organization in meeting the needs of this solicitation. In addition, the Respondent must include résumés for key leadership personnel describing their work experience, education, and training as it relates to the requirements of this solicitation and the Contract.

4.2.5.2 The Response shall include the Respondent’s operational approach to the recruitment, training, supervision, and retention of qualified personnel as described in the Contract.

4.2.5.3 The Response shall include the Respondent’s ability to collaborate with a Seminole Tribe’s Qualified Evaluators as described in **Standard Contract Part 2**, **Sections C.1.5** and **C.1.6.**

4.2.6 Response Section 5: Service Capability and Approach to Services

The Respondent’s Response should demonstrate the Respondent’s capability in providing processes, approaches, and tools to perform requested services described in the Contract**.**

4.2.6.1 Detailed description of the Respondent's approach for Scope of Work services, management responsibilities, and means of completing Deliverables and meeting Performance Measures as defined in the Department's **Standard Contract Part 2**.

4.2.6.2 The Response should include a proposed approach or model to the Service Tasks as described in **Standard Contract Part 2, Section C.1**.

4.2.6.3 The Response should include a Project Plan and general timeline of activities for the Service Tasks described in **Standard Contract Part 2, Section C.1**. Include anticipated barriers and challenges, if any, and how the Respondent will mitigate these items. The Respondent shall indicate in the timeline when the toll-free hotline will be fully operational, and the QE will begin client assessments. Up to four points may be awarded to Respondents who are able to begin services within the first month of contract execution. Points will be awarded based on the feasibility, completeness, and reasonableness of the proposed implementation approach and timeline.

4.2.6.4 The Response should include the proposed approach to the Administrative Tasks described in **Standard Contract Part 2, Section C.2**.

4.2.6.5 The Response should include the proposed staffing plan to successfully deliver the services set out in this Contract.

4.2.6.6 The Response must address the Respondent's plan for maintaining and meeting the responsibilities for subcontracting described in **Standard Contract Part 2, Section C.2.3.**

4.2.6.7 Documented experience with coordinating and hosting in-person meetings for a government agency within the past three years. Acceptable documentation includes a narrative summary of previous experience.

4.2.6.8 Documented experience with Florida Medicaid program and the ability to design and implement cost savings methodologies.

4.2.7 Response Section 6: Prior Similar Projects

Respondents shall submit details regarding three similar projects for which similar or identical services were performed within the past five years.

4.3 Content of the Financial Response

4.3.1 Financial Response Title Page

4.3.2 Response Section 7: Cost Proposal:

The Respondent will use **Appendix V: Cost Proposal**, to provide a not-to-exceed price for the services described in the Contract. The Department reserves the right to negotiate lower rates with the selected Respondent(s).

4.3.3 Response Section 8: Financial Information

4.3.3.1 Financial Management

The Respondent must describe its current financial management and accounting systems and capability to complete the Service Tasks described in **Standard Contract Part 2, Section C.1.**

4.3.3.2 Proposed Service Efficiencies and Re-investment

The Respondent shall provide information on how it plans to develop efficiencies in the services being provided. From this plan, the Respondent

shall show how the cost reduction or added services that are realized from these efficiencies will be re-invested into the required services.

4.3.3.3 Ongoing Approach to Reduce Administrative Costs and Expand Services

The Respondent shall provide its ongoing approach to reduce administrative cost, without affecting the quality of the services.

4.3.3.4 Local Match

No local match is required.

4.3.4 Response Section 9: Budget

The Respondent should use **Appendix VI: Budget Summary and Detail Instructions**, **Appendix VII: Project Budget Summary**, and **Appendix VIII: Proposed Annual Payment Table.**

4.3.4.1 The Respondent must include a budget line item and budget narrative for each of the following fiscal years:

4.3.4.1.1 January 1, 2027, through June 30, 2027;

4.3.4.1.2 July 1, 2027, through June 30, 2028;

4.3.4.1.3 July 1, 2028, through June 30, 2029, and

4.3.4.1.4 July 1, 2029 – December 31, 2029

4.3.4.2 The budget totals should be based on available funding projections, if any, and if different, the Respondent should explain the differences.

4.3.4.3 The Respondent must include a **Proposed Annual Payment Table, Appendix VIII**, that provides a breakdown of the Proposed Unit Price for each of the Service Units listed on the table.

SECTION 5. THE SELECTION METHODOLOGY

The Department intends to award the Contract to the responsible and responsive Respondent(s) whose Response is determined, in writing, to be the most advantageous to the state. The Department will award the Contract based on a consideration of the relative importance of price and other evaluation criteria set forth in the solicitation. The Department may also make a determination as to whether to deem one or more Respondents ineligible for award due to non-responsibility or non-responsiveness. The Department will electronically post the intent to award in accordance with §120.57(3)(a), F.S., and Rule 60A-1.021, F.A.C.

5.1 Selection Criteria

The Department may consider any information that reflects upon a Respondent's capability to fully perform the Contract requirements and demonstrates the level of integrity and reliability required to assure performance of the Contract.

5.2 Evaluation Phase Methodology

All Responses determined to be responsive will be evaluated using the process outlined below. Each Evaluator shall assign a score for each evaluation criterion based upon their assessment of the response. The assignment of an individual score shall be based upon the following description of the point scores:

DESCRIPTION	CATEGORY	POINTS
Extensive competency, proven capabilities, an outstanding approach to the subject area, innovative, practical, and effective solutions, a clear and complete understanding of inter-relationships, a clear and	Superior	4

comprehensive understanding of the requirements and planning for the unforeseen.		
Clear competency, consistent capability, a reasoned approach to the subject area, feasible solutions, a generally clear and complete description of inter-relationships, and a sound understanding of the requirements	Good	3
Fundamental competency, adequate capability, a basic approach to the subject area, apparently feasible but somewhat unclear solutions, a weak description in some areas, a fair understanding of the requirements, and a lack of staff experience and/or skills in some areas.	Adequate	2
Little competency, minimal capability, an inadequate approach to the subject area, infeasible and/or ineffective solutions, somewhat unclear, incomplete, a lack of understanding of the requirements and a lack of demonstrated experience and skills	Poor	1
A significant or complete lack of understanding, an incomprehensible approach, a significant or complete lack of skill and experience.	Insufficient	0

5.2.1 Programmatic Scoring

The Department's Evaluators will independently evaluate each Programmatic Response in accordance with the following criteria:

CRITERIA	**SCORE (0 – 4)**	**WEIGHT**
Procurement Officer: Did the Respondent disclose any current Corrective Action Plan's (CAP) with the Department, is in the process of being placed on a CAP, and or been on a CAP within the last 6 months due to noncompliance, nonperformance, or unacceptable performance?	Yes/No	
Response Section 3: Executive Overview (Section 4.2.4.) How well does the Respondent's approach, mission statement, core values, and vision align with the contract goals outlined in the **Standard Contract Part 2, Section B.2**?		3
How well does the Response demonstrate the Respondent's overall capability and experience to successfully complete the work outlined in the solicitation, including all appendices, attachments, exhibits, and referenced supporting documentation?		4
Response Section 4: Core Team Qualifications (Section 4.2.5) Adequacy of the Respondent's qualifications and credentials of their leadership team with an explanation of why the leadership team is qualified to lead their organization in meeting the needs of this solicitation.		3
Adequacy of the Respondent's operational approach to the recruitment, training, supervision, and retention of qualified personnel as described in the Contract.		4

CRITERIA	SCORE (0 – 4)	WEIGHT
How well does the Response demonstrate the Respondent's ability to collaborate and assist the Seminole Tribe's Qualified Evaluators, as outlined in **Standard Contract Part 2, Section C.1.3.4.**?		2
Response Section 5: Service Capability and Approach to Services (Section 4.2.6) How well does the Respondent demonstrate the ability to ensure comprehensive Initial Suitability Assessments for children entering Residential Treatment Centers?		4
How adequate is the Respondent's approach to conducting both in- state and out-of-state 60-day independent reviews for children in Residential Treatment Centers. How do they ensure consistency and effectiveness across different locations?		3
How well does the Respondent demonstrate the ability to conduct 90- day assessments for children in Residential Treatment Centers, both within and outside the state? What measures will be used to ensure timely and thorough assessments?		3
How well does the Respondent demonstrate the ability to handle reconsideration assessments for children in Residential Treatment Centers including a description for their process for reassessing suitability and making necessary adjustments?		3
How well does the Respondent demonstrate the ability to conduct preliminary assessments for children in need of Behavioral Qualified Residential Treatment Programs (BQRTP) including steps that are taken to ensure accurate preliminary recommendations and do these steps align with the Department's goals for this Contract?		4
How well does the Respondent demonstrate the ability to carry out full assessments for children requiring Behavioral Qualified Residential Treatment Programs (BQRTP) including a description to their approach for gathering information, conducting interviews, and making placement recommendations?		4
How well does the Respondent demonstrate the ability to ensure that Qualified Evaluators (QEs) will apply standardized criteria when determining initial suitability for residential treatment and assessing appropriateness of continued care?		4
How well does the Respondent demonstrate the ability to onboard and train Seminole Tribe's Qualified Evaluators (QEs) in the network within 60 days of contract execution, including an approach to ensure seamless integration and collaboration with the Seminole Tribe's QEs?		3

CRITERIA	SCORE (0 – 4)	WEIGHT
How well does the Respondent demonstrate the ability to create a Key Performance Indicator (KPI) tool for reporting performance outcomes to the Department that ensures that the KPI tool effectively captures and communicates performance metrics for each assessment type?		3
How well does the Respondent demonstrate the ability to ensure efficient handling of referrals for Initial Suitability Assessments, including the notification process, database management, selection of Qualified Evaluators (QEs), and adherence to timeline requirements specified for both general referrals and those involving the Seminole Tribe of Florida?		4
How well does the Respondent demonstrate the ability to ensure that all necessary parties, including the Child Welfare Caseworker, Guardian Ad-Litem, and Attorney Ad-Litem, are informed of assessment details including how they will handle the receipt of referrals and supporting documents prior to scheduled assessment dates, ensuring readiness for conducting Initial Suitability Assessments on children in the care and custody of the Department?		3
How well does the Respondent demonstrate the ability to manage the scheduling of 60-Day Independent Reviews within the mandated 30- calendar-day timeframe upon receipt of referrals, ensuring coordination with the facility and communication of Qualified Evaluator (QE) requirements for medical record review?		3
How well does the Respondent demonstrate the ability to conduct the process for 60-Day Independent Reviews to assess children's progress toward treatment plan goals and objectives, including considerations for in-state placements, suitable assessment spaces, and methods of assessment completion (telephonic or secure video teleconference) including a description on how they will ensure QE access to relevant medical records and the utilization of the Child and Adolescent Needs and Strengths (CANS) trauma Comprehensive assessment tool during 60-Day Independent Reviews?		3
How well does the Respondent manage the recommendation and reporting of second level reviews for children in Therapeutic Group Homes following the completion of 60-Day Independent Reviews and 90-Day Assessments by Qualified Evaluators (QEs) satisfying the requirements of s. 39.407(6)(b)2., F.S. including a description about the process for incorporating second level review reports into the "monthly billing and tracking" report for the respective service periods?		3
How adequate are the Respondent’s procedures for conducting Reconsideration Assessments in accordance with the specified timeline of eleven (11) calendar days from referral receipt?		3
How well does the Respondent ensure appropriate scheduling and coordination with the child's current location for assessment settings, as well as communication with the Point of Contact (POC) regarding supporting documentation for Qualified Evaluator (QE) review including an explanation of their process for handling Request for Reconsideration submissions, including		4

CRITERIA	SCORE (0 – 4)	WEIGHT
review, determination, and notification procedures, as well as considerations for court-ordered reconsiderations?		
How well does the Respondent demonstrate the ability to manage the scheduling and conduct of Reconsideration Assessments for children in Behavioral Qualified Residential Treatment Programs (BQRTP) within the mandated timeline of five (5) calendar days from referral receipt including an outline of the procedures for scheduling appointments in appropriate settings based on the child's current location, as well as communication with the Point of Contact (POC) to ensure timely provision of supporting documentation to the evaluator?		4
How adequate is the Respondent's process for rescheduling Qualified Evaluator (QE) assessments in the event of cancellations, considering the specified consultation requirements with involved parties such as the Point of Contact (POC), Child Welfare caseworker, SIPP, Residential Treatment Center, Department of Juvenile Justice, or Crisis Stabilization Unit Facility including a description on how they handle cancellations initiated by the CBC/Case Management Agency and ensure compliance with the 15-minute grace period policy before appointments are cancelled due to no-shows?		3
How adequate is the Respondent's their process for developing the initial, 60-Day Independent Review, and 90-Day Assessment criteria and instruments, including ensuring compliance with Department guidelines and obtain prior approval for the suitability assessment instruments and describing the instruments used by Qualified Evaluators (QEs), including criteria such as identifying information, assessment reasons, record review results, interview outcomes, suitability assessment criteria, and findings/recommendations, as specified in the contract.		3
How adequate is the Respondent's process for preparing and submitting typewritten reports following each assessment, as outlined in the **Standard Contract Part 2, Section C.2.5**?		3
How well does the Respondent ensure compliance with statutory language requirements regarding the summary of findings and recommendations including outlining their procedures for submitting reports to the Department, timelines and methods, as well as the contents of the monthly summary report, monthly billing and tracking report, monthly and annual KPI reports, and the mid-treatment CANS report, as specified in **Standard Contract Part 2, Section C.2.5**?		3
How adequate is the Respondent's process for developing and implementing a complaint resolution and customer service tracking system, as outlined in the **Standard Contract Part 2, Section C.1.8.1,** including how the system identifies and tracks both clinical and non- clinical caller issues?		3

CRITERIA	SCORE (0 – 4)	WEIGHT
How well does the Respondent ensure the availability and functionality of a toll-free customer service telephone system, including staffing, operational hours, message handling procedures, how their customer service program accommodates non-English speakers, the hearing impaired, and individuals requiring special assistance?		2
How adequate are the Respondent's procedures for responding to telephone calls and written inquiries, including timelines for response and documentation of procedural actions taken because of complaints, in alignment with the Department's procedures?		2
How well does the Respondent ensure that the training materials comprehensively cover all procedures related to the suitability process outlined in the contract, detailing every aspect addressed therein, for both providers and Department staff?		3
Does the Respondent's Project Plan meet the needs of the Department including the general timeline of activities for the Service Tasks described in **Standard Contract Part 2, Section C.1**? This should include anticipated barriers and challenges, if any, and how the Respondent will mitigate these items. Did the Respondent indicate in the timeline when the toll-free hotline will be fully operational, and the QE will begin client assessments? Does the Respondent's proposed timeline for developing and fully operating the toll-free hotline align with the Department's anticipated contract execution date?		3
Does the Response demonstrate the ability to fully implement services and begin operations within thirty (30) calendar days of contract execution?		1
Response Section 6: Prior Similar Projects (Section 4.2.8.) Adequacy of the Respondents details regarding three similar projects for which similar or identical services were performed within the past five years?		3
TOTAL		103

5.2.2 Financial Scoring:

The Department's Evaluator(s) will independently evaluate each Financial Response in accordance with the following criteria:

Criteria	Score (0 – 4)	Weight
Response Section 7: Cost Proposal (Section 4.3.2) How reasonable is the Respondent's proposed cost per Assessment?		3
Response Section 8: Financial Information (Section 4.3.3.) Adequacy of the Respondent's financial management approach, including proposed service efficiencies and re-investment and ongoing approach to reduce administrative costs and expand services.		4

Criteria	Score (0 – 4)	Weight
How well does the Respondent's proposed expenditures meet the minimum requirements established by the Florida's Department of Financial Services, Division of Accounting and Auditing, Bureau of Auditing, Reference Guide for State Expenditures?		4
Response Section 9: Budget (Section 4.3.4) Did the Respondent's proposed budget seem aligned with the proposed services/activities? Were the budget line-items necessary, reasonable, and allowable?		4
TOTAL		15

5.2.3 Total Score of Responses

The Procurement Officer will average the total scores and use the total points to rank Respondents. This ranking will serve as the recommended ranking of the Department's Evaluators**.**

5.2.4 Report of the Procurement Officer

The Procurement Officer will prepare a report regarding Responses deemed responsive and responsible, including additional information such as the Respondent's Evaluator rankings. The Secretary, or the Secretary's designee, will then decide the awarded Respondent(s).

5.2.5 Selection of Respondent(s), Decision to Reject All, or Cancel

The Department will make a determination to award to the Respondent(s), reject all Responses, or cancel this solicitation. The Department will provide notice, in writing, it's decision on VIP: https://vendor.myfloridamarketplace.com/

5.2.6 Requirements Following Award

5.2.6.1 Registration With the Florida Department Of State

If awarded a Contract, the Respondent shall provide a PDF file of its current and active registration with the Florida Department of State prior to execution of a Contract or, if exempt from registration, a statement to that effect noting the basis for the exemption. Respondents should note that foreign entities are required to obtain a Florida Certificate of Authorization pursuant to applicable Florida Statutes from the Florida Department of State, Division of Corporations, to transact business in the State of Florida. For additional information, visit: https://dos.myflorida.com/sunbiz/.

5.2.6.2 Florida Substitute Form W-9

It is the responsibility of the awarded Respondent to complete a Florida Substitute Form W-9 prior to execution of a Contract. The Internal Revenue Service receives and validates the information provided on the Florida Substitute Form W-9. For instructions on how to complete the Florida Substitute Form W-9, visit: https://flvendor.myfloridacfo.com/**.**

5.2.7 Resulting Contract

The Contracting document resulting from this solicitation will be substantially similar to the draft Contracting document included with this solicitation. By submitting a Response, the Respondent confirms its willingness to enter into a Contract with the Department containing the terms and conditions or substantially similar terms.

APPENDIX I: CERTIFICATE OF SIGNATURE AUTHORITY

Check below and complete Section A or Section B	
	Respondent is not a sole proprietorship (Complete Section A)
	Respondent is a sole proprietorship (Complete Section B)

Section A

I, _____ (name), hold the office or position of _____ (title) with_____ (legal name of Respondent) and have authority to make official representations by said Respondent regarding its official records and hereby state that my examination of the Respondent's records show that _____ (name) currently holds the office or position of _____ (title) with the Respondent and currently has authority to make binding representations to the Department and sign all documents submitted on behalf of the above-named Respondent in response to solicitation # _____, and, in so doing, to bind the named Respondent to the statements made therein.

Dated:

Signature:

Printed Name:

Title:

NOTE: In lieu of the above, the Respondent may submit a corporate resolution or other duly executed certification issued in the Respondent's normal course of business to prove signature authority of the named Authorized Representative.

Section B

I, _____(name) am a sole proprietor, personally doing business in the name of _____ (name of Respondent), and will be personally bound by the Response submitted in response to solicitation # _____.

Dated:

Signature:

Printed Name:

APPENDIX II: RESPONDENT'S CERTIFICATIONS

CERTIFICATIONS		
MASTER CERTIFICATION		
As the person named in the Certificate of Signature Authority as the Authorized Representative of the Respondent, _____ (legal name of Respondent), I confirm that I have fully informed myself of all terms and conditions of solicitation #_____ (the solicitation), the facts regarding the Response submitted by the Respondent in response to the solicitation and the truth of each statement contained in Certifications (a) through (f) and certify, by checking the applicable "true" or "false" box below and affixing my signature hereto, that each statement in each checked certification is "true" or "false" as indicated.		
Check the applicable box next to the title to each certification:		
True	**False**	
		a. Certification of Binding Response and Acceptance of Terms of the Solicitation and Contract Document
		b. Statement of No Prohibited Involvement
		c. Statement Non-Collusion
		d. Certification Regarding Subcontractors
		e. Certification Regarding Prior Contractual Obligations
		f. Certification of Representations per Sections 287.133, and 287.134, F.S.
The content of each certification named above, set forth below, is incorporated into this Master Certification as if fully recited herein and, for each certification marked "true" above, the below signature is deemed to be affixed to each such certification. I agree that any certification not marked above will be deemed "false."		
Signature of Authorized Representative:	Date:	
a. Certification of Binding Response and Acceptance of Terms of the Solicitation and Contract Document		
By checking the "True" box in the Master Certification and signing the same, I hereby certify that the Respondent's Response submitted in response to the Department of Children and Families Request for Responses (the solicitation) is binding on the Respondent in accordance with the terms of the solicitation. If awarded any Contract as a result of the solicitation, the Respondent will comply with the specifications, terms, and conditions stated in the solicitation and the Contract document.		
b. Statement of No Prohibited Involvement		
By checking the "True" box in the Master Certification and signing the same, I hereby certify that no member of this firm or any person having interest in this firm has: Been awarded a Contract as described in §287.057(19)(c), Florida Statutes, to perform a feasibility study of the potential implementation of a subsequent Contract to support this project, participated in drafting of a solicitation for this specific project, or developed a program for future implementation of this project.		

c. Statement of Non-Collusion

By checking the "True" box in the Master Certification and signing the same, I hereby certify that all persons, companies, or parties interested in the solicitation as principals are named therein, that the Respondent's Response is made without collusion with any other Respondent.

d. Certification Regarding Subcontractors

By checking the "True" box in the Master Certification and signing the same, I hereby certify the Respondent's agreement that by submitting a Response to this solicitation, the Respondent waives any exclusivity provision in its subcontractor agreements.

e. Certification Regarding Prior Contractual Obligations

By checking the "True" box in the Master Certification and signing the same, I hereby certify the Respondent has not:

(1) Failed to correct any unsatisfactory performance in a previous Contract to the satisfaction of any Agency or eligible user;

(2) Had a Contract terminated by any Agency or eligible user for cause; or

(3) Failed to sign a Contract awarded by any Agency.

f. Certification of Representations Per Sections 287.133, and 287.134, F.S.

By checking the "True" box in the Master Certification and signing the same, I hereby certify the Respondent is not listed on the Suspended Vendors List maintained pursuant to Rule 60A-1.006, F.A.C., Convicted Vendors List created and maintained pursuant to §287.133, F.S., or on the Discriminatory Vendors List created and maintained pursuant to §287.134, F.S, and, if federal funds are used, the Respondent is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency, as listed in the System for Award Management (SAM), in accordance with 2 CFR Part 180 and Part 200.

TIE BREAKING CERTIFICATIONS

Statutory Preferences When Awarding Contracts

Various provisions of §287 and §295, F.S., provide qualifying Respondents the advantage of "tie breakers" whenever two or more bids, Responses, or replies received by an agency are equal with respect to price, quality, and service. In order to take advantage of the below "tie breakers," a Respondent who meets the statutory qualifications for one or more of these "tie breakers" must certify that it qualifies for the cited preference. Completion of the certification is optional for qualifying Respondents; however, a Respondent waives all rights to consideration of a "tie breaker" if it fails to submit the certification on or before the deadline to submit its bid, Response, or reply.

MASTER CERTIFICATION – TIE-BREAKING CERTIFICATIONS

As the Authorized Representative of the Respondent, _____ (legal name of Respondent), I confirm that I have fully informed myself of all terms and conditions of the solicitation _____(the solicitation), the facts regarding the Response submitted by the Respondent in response to the solicitation and the truth of each statement contained in Certifications (g) through (k) and certify, by checking one or more of the boxes below and affixing my signature hereto, that each statement in each checked certification is true.

Check the box next to the title to each certification that is true:

	g. Certification of a Certified Minority Business Enterprise
	h. Certification of a Certified Veteran Business Enterprise

	i. Certification of a Florida Business
	j. Certification of a Foreign Manufacturer with a Factory in Florida
	k. Certification of a Drug Free Workplace

The content of each certification named above, set forth below, is incorporated into this Master Certification as if fully recited herein and, for each certification marked "true," above, the below signature is deemed to be affixed to each such certification. I agree that any certification not marked above will be deemed "false."

Signature of Authorized Representative:	Date:

g. Certification of a Certified Minority Business Enterprise

By checking the "True" box in the Master Certification – Tie-Breaking Certifications and signing the same, I hereby certify that my organization is a Certified Minority Business Enterprise in accordance with §287.0943, Florida Statutes.

h. Certification of a Florida Certified Veteran Business Enterprise

By checking the "True" box in the Master Certification – Tie-Breaking Certifications and signing the same, I hereby certify that my organization is a Certified Veteran Business Enterprise in accordance with §295.187, Florida Statutes.

i. Certification of a Florida Business

By checking the "True" box in the Master Certification – Tie-Breaking Certifications and signing the same, I hereby certify that my organization's principal place of business is located within Florida in accordance with §287.084, Florida Statutes.

j. Certification of a Foreign Manufacturer with a Factory in Florida

By checking the "True" box in the Master Certification – Tie-Breaking Certifications and signing the same, I hereby certify that my manufacturing organization has a factory in Florida that employs over 200 employees working in Florida in accordance with §287.092, Florida Statutes.

k. Certification of a Drug Free Workplace

By checking the "True" box in the Master Certification and signing the same, I hereby certify the Respondent currently maintains a drug-free workplace environment in accordance with §287.087, Florida Statutes, and will continue to promote this policy through implementation of that section.

APPENDIX III: VENDOR QUESTIONS

Each Respondent is to complete **Appendix III: Vendor Questions** for questions relating to this solicitation. Questions shall be submitted in accordance with the instructions provided in **Section 2.2** of the solicitation. This form may be expanded as needed to facilitate response to this requirement.

Instructions:

1. Complete one question per row.
2. Complete all fields. For Solicitation Section: include the title of the solicitation document (E.g., **Instructions** or **Required Certifications**), Section Reference, and Page Number related to the question. If the question does not pertain to a specific Document Title/Section/Page within the solicitation, use “General”.
3. Additional rows for questions can be added.

#	RESPONDENT NAME	SOLICITATION SECTION (DOCUMENT TITLE, SECTION, PAGE)	QUESTION
1.			
2.			
3.			

APPENDIX IV: SUBCONTRACTOR LIST

List the subcontractors who will perform work under the Contract(s) resulting from this solicitation.

CHECK HERE IF NO SUBCONTRACTORS WILL BE UTILIZED: ☐

Subcontractor Name:	
Business Type:	
Subcontracted Services:	
Address:	
City, State Zip	
Phone #	
FEIN #	

Subcontractor Name:	
Business Type:	
Subcontracted Services:	
Address:	
City, State Zip	
Phone:	
FEIN #	

Subcontractor Name:	
Business Type:	
Subcontracted Services:	
Address:	
City, State Zip	
Phone #	
FEIN #	

Subcontractor Name:	
Business Type:	
Subcontracted Services:	
Address:	
City, State Zip	
Phone:	
FEIN #	

[Duplicate table as necessary for additional subcontractors.]

APPENDIX V: COST PROPOSAL

FOR THE [Insert Contract year] CONTRACT YEAR

Cost Proposal shall serve as the Respondent's summary pricing sheet. The total proposed cost reflected in **Appendix V** must reconcile to the **Project Budget Summary (Appendix VII**) and the **Proposed Annual Payment Table (Appendix VIII).**

Line Item	This Application	Funding Source A	Funding Source B	Funding Source C	Total
Personnel Category					
<insert position title>					
<insert position title>					
<insert position title>					
<insert position title>					
<insert position title>					
<insert position title>					
Fringe Benefits					
Staff Travel					
Subcontracted Services					
Office Expenses					
Operating Capital Outlay					
Rental or Use of Space					
Rental of Equipment					
Maintenance Agreements					
Insurance					
Membership Fees and Subscriptions					
Advertising					
Client Education and Training Tools					
Indirect Costs					
Total					

APPENDIX VI: BUDGET SUMMARY AND DETAIL INSTRUCTIONS

The project budget summary should display all costs to be paid by the Department for the delivery of services resulting from this RFP. Use the Project Budget Summary format and list the appropriate amounts for all line items that will be expended during the budget period. The format displays the suggested line items to be covered for this project, other line items may be added, if necessary. “Miscellaneous” and “Other” are not acceptable line items.

In addition to and in support of the Project Budget Summary, a detailed description must be provided for each line item displaying the methodology used to calculate the total for the line item. Documentation must show the percentage of costs being charged to the Department, if the Respondent has another source of income providing funding to this project. Items requiring estimated costs must be accompanied by sufficient documentation or explanation to support the estimate. An estimated number of units must be provided for each line item calculated using a unit rate x unit cost calculation. In addition:

□ Salaries provided must be comparable with similar positions in the surrounding labor market and a job description must be provided for each position listed. Include the number of full-time employees (FTEs) to be funded in whole or in part by this project.

□ Fringe benefits must display the calculation of costs, specifically the percentages or rates for each benefit being charged to this project.

□ Staff Travel is reimbursed as specified by Department travel policies and procedures in CFOP 40-1 and §112.061, Florida Statutes.

□ Office expenses should be based on prior history, a reasonable estimated monthly expense, or written Respondent policy.

□ Rental or use of space must show the address, the square footage, and the rate per square footage.

□ Rental equipment necessary to carry out the delivery of services must include the unit cost (per month) and the number of months the item(s) will be used.

□ Insurance costs must provide sufficient documentation to explain the percentage of cost being charged to this project and the calculation of the cost and the insurance coverage being provided.

□ Advertising/outreach costs must show the estimated number of units (publications or media events) and the estimated cost for each publication or event.

□ Membership fees and subscriptions necessary for the delivery of services must show the estimated costs and number of units projected.

□ Client education and training tools must provide the types of services to be provided, the estimated number of clients to be served, and the estimated unit cost of each service.

□ Information Resource Technology (IRT) includes computers, monitors and other technology items costing less than $1,000 each and must include a brief description of the item(s) to be purchased, the unit cost for each item and justification for each item. For recurring costs, must show the estimated unit cost for each recurring cost associated with the delivery of services, including internet access, computer/network/printer maintenance, SAVE system access, etc.

□ Subcontracted services such as janitorial services or security services must show the monthly rate and the number of months for which service is required.

□ Subcontracted client services providing direct services to clients must include the Respondent(s) to be subcontracted with, the services to be provided, the estimated number of clients to be served and the unit cost for service(s).

□ Financial audits being covered in part or in whole with project funds must show the rate used to calculate this cost or the percentage of cost being allocated to this project.

□ Operating capital outlay (OCO) to be purchased for use under this project must show the number of units to be purchased, the estimated cost for each unit and justification for the item(s) being purchased.

□ Office equipment (non-OCO) to be purchased under this Contract (costing less than $1,000 each) for use under this project must show the number of units to be purchased, the estimated cost for each unit and justification for the item(s) being purchased. Purchases must be estimated in accordance with the State's guidelines found at https://www.myfloridacfo.com/division/aa/memo

□ Indirect costs being charged to the project must show the percentage of funding required by the Respondent to carry out the common or joint tasks covered by this line item. A summary of the expenditures covered by these funds is required.

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APPENDIX VII: PROJECT BUDGET SUMMARY

Respondent Name

FFY (Insert Year) - (Insert Dates)

Budget Line Item				**Line-Item Totals**		**Category Total**	
Personnel Category							
A.	Personnel			$	-		
B.	Fringe Benefits			$	-		
C.	Other Personnel Services (OPS)			$	-		
D.	Background Checks			$	-		
			Total Personnel Category:			**$**	**-**
Travel Category							
E.	Staff Travel & Training			$	-		
F.	Client Transportation			$	-		
			Total Travel Category:			**$**	**-**
Expense Category							
G.	Office Expenses						
	1.	Utilities	$	-			
	2.	Telephone	$	-			
	3.	Postage/Shipping	$	-			
	4.	Copies/Printing	$	-			
	5.	Office Supplies	$	-			
	6.	Janitorial Supplies	$	-			
	7.	Building Maintenance/Repair	$	-			
	8.	Equipment Repair	$	-			
	9.	Security Services	$	-			
	10.	Office Equipment/Furniture	$	-			
			Total Office Expenses:		$	-	
H.	Rental or Use of Space				$	-	

I.	Rental Equipment		$	-	
J.	Insurance		$	-	
K.	Advertising/Outreach		$	-	
L.	Membership Fees & Subscriptions		$	-	
M.	Client Educational and Training Tools		$	-	
N.	Fixed Price Services		$	-	
O.	Information Resource Technology		$	-	
P.	Subcontracted Services		$	-	
Q.	Subcontracted Client Services		$	-	
R.	Financial Audit		$	-	
		Total Expense Category:		**$**	**-**
Direct Costs Category					
S.	Operating Capital Outlay (OCO->$1,000.00)			$	-
T.	Indirect Costs ____ % of Total Direct Costs			$	-
		Subtotal Direct Costs:		**$**	**-**
		Total Project Budget		**$**	**-**

Sample Format; Columns and rows can be added as needed.

APPENDIX VIII: PROPOSED ANNUAL PAYMENT TABLE
PER STATE FISCAL YEAR

SFY 2026-2027 January 1, 2027 – June 30, 2027 (6 months)						
ASSESSMENT TYPE	**MINIMUM NUMBER OF ASSESSMENTS PER MONTH**	**ESTIMATED MAXIMUM NUMBER OF ASSESSMENTS PER YEAR**	**PRICE PER ASSESSMENT**	**TOTAL PRICE PER MONTH**	**TOTAL FOR SFY**	**DOCUMENTATION**
Initial Suitability Assessments (Including BQRTP Assessments) (QEN)	25	492	**$**	**$**		Verified by Monthly Assessment Report
60-Day & 90-Day Assessments (including BQRTP Assessments) (QEN)	25	705	**$**	**$**		Verified by Monthly Assessment Report
Coordination of Admin Rescheduling Fee (QEN)	10	205	**$**	**$**		Verified by Monthly Assessment Report
Total for SFY						**$**

SFY 2027 – 2028 July 1, 2027 – June 30, 2028						
ASSESSMENT TYPE	**MINIMUM NUMBER OF ASESSMENTS PER MONTH**	**ESTIMATED MAXIMUM NUMBER OF ASSESSMENTS PER YEAR**	**PRICE PER ASSESSMENT**	**TOTAL PRICE PER MONTH**	**TOTAL FOR SFY**	**DOCUMENTATION**
Initial Suitability Assessments (Including BQRTP Assessments) (QEN)	25	985	**$**	**$**		Verified by Monthly Assessment Report
60-Day & 90-Day Assessments (including BQRTP Assessments) (QEN)	25	1410	**$**	**$**		Verified by Monthly Assessment Report
Coordination of Admin Rescheduling Fee (QEN)	10	410	**$**	**$**		Verified by Monthly Assessment Report
Total						**$**

SFY 2028 – 2029 July 1, 2028 – June 30, 2029						
ASSESSMENT TYPE	**MINIMUM NUMBER OF ASESSMENTS PER MONTH**	**ESTIMATED MAXIMUM NUMBER OF ASSESSMENTS PER YEAR**	**PRICE PER ASSESSMENT**	**TOTAL PRICE PER MONTH**	**TOTAL FOR SFY**	**DOCUMENTATION**
Initial Suitability Assessments (Including BQRTP Assessments) (QEN)	25	985	**$**	**$**		Verified by Monthly Assessment Report
60-Day & 90-Day Assessments (including BQRTP Assessments) (QEN)	25	1410	**$**	**$**		Verified by Monthly Assessment Report
Coordination of Admin Rescheduling Fee (QEN)	10	410	**$**	**$**		Verified by Monthly Assessment Report
Total						**$**

SFY 2029 – 2030 July 1, 2029 – December 31, 2029 (Six months)						
ASSESSMENT TYPE	**MINIMUM NUMBER OF ASESSMENTS PER MONTH**	**ESTIMATED MAXIMUM NUMBER OF ASSESSMENTS PER YEAR**	**PRICE PER ASSESSMENT**	**TOTAL PRICE PER MONTH**	**TOTAL FOR SFY**	**DOCUMENTATION**
Initial Suitability Assessments (Including BQRTP Assessments) (QEN)	25	492	**$**	**$**		Verified by Monthly Assessment Report
60-Day & 90-Day Assessments (including BQRTP Assessments) (QEN)	25	705	**$**	**$**		Verified by Monthly Assessment Report
Coordination of Admin Rescheduling Fee (QEN)	10	205	**$**	**$**		Verified by Monthly Assessment Report
Total						**$**