Addendum No. 03 with Written Inquiry Responses
DCF RFP 2324 081
QUALIFIED EVALUATOR NETWORK

Solicitation Number:	DCF RFP 2324 081
Solicitation Title:	Qualified Evaluator Network (QEN)
Response(s) Due Date:	09/10/26
Addendum Number:	03
Addendum Date:	08/31/26

FAILURE TO FILE A PROTEST WITHIN THE TIME PRESCRIBED IN SECTION 120.57(3), FLORIDA STATUTES, 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, FLORIDA STATUTES.

DCF RFP 2324 081 *is hereby amended as follows, all other terms and conditions of the solicitation remain in effect. All additions are highlighted in yellow, and words ~~stricken~~ are deletions:*

Change No. 1

Standard Contract Part 2, Exhibit C, Section C.1.7.1.3.

For In-State Assessments, the Provider shall conduct the assessment through a face-to- face clinical interview or secure video teleconference with the child. For Out-of-State Assessments, the interview may be conducted via telephone if video teleconferencing is not feasible. Unless otherwise specified in the solicitation, Out-of-State Assessments shall follow the same applicable turnaround requirements as Initial Suitability Assessments.

Change No. 2

Standard Contract Part 2, Exhibit C, Section C.1.7.6.2.3.

The Provider must submit the Full BQRTP Assessment to the Lead Agency within 30 calendar days of the child's placement in a BQRTP. The components for the Full BQRTP Assessments are:

Change No. 3

Standard Contract Part 2, Exhibit C, Section C.1.6.2.3.

Ensure the Non-STQE completes the Initial Suitability Assessment within seven (7) ~~business~~ calendar days of receiving the referral.

Standard Contract Part 2, Section C.1.6.3.2.

Ensure the STQE completes the assessment within seven (7) ~~business~~ calendar days from the date of referral.

Standard Contract Part 2, Section C.1.7.1.10.2.

The assessment shall be completed within seven (7) ~~business~~ calendar days from the date of referral.

Standard Contract Part 2, Attachment 1, Minimum Performance Measure #2.

2.	Ninety-five percent (95%) of Initial Suitability Assessments ~~(including Preliminary BQRTP Assessments)~~ shall be completed within ~~five (5)~~ seven (7) ~~business~~ calendar days of receipt of request. Preliminary BQRTP Assessments shall be completed within three (3) business days of receipt of the request. The final report for each Assessment shall be generated and sent to the Provider within three (3) business days and forwarded to all necessary parties. The Department will perform a random five percent (5%) sample to verify services were provided according to this Contract. **Section ~~C.1.2.~~ C.1.7.1.10. & C.1.7.6.1**		The Provider's monthly invoice payment will be reduced by five percent (5%) of the invoice total, for each month that this standard is not met.	

Change No. 4

Standard Contract Part 2, Attachment 1, Minimum Performance Measure #3 & #4

3.	Ninety-five percent (95%) of 90-day Assessments and Reconsideration Assessments shall be completed within ~~14 business~~ eleven (11) calendar days of receipt of request. The final report shall be generated and sent to the Provider within ~~three (3) business~~ five (5) calendar days and forwarded to all necessary parties. The Department will perform a random five percent (5%) sample to verify services were provided according to this Contract. **Section C.1.7.3 & C.1.7.5**		The Provider's monthly invoice payment will be reduced by five percent (5%) of the invoice total, for each month that this standard is not met.	
4.	BQRTP Full and Reconsideration Assessments - Ninety-five percent (95%) of 60- & 90-day Assessments shall be completed within 14 business days of receipt of request. The final report shall be generated and sent to the Provider within three business days and the Provider shall submit the final report electronically to the Department, or their designee, within three (3) business days of receipt. The Department will perform a random, five percent (5%) sample to verify services were provided according to this Contract. **Section ~~C.1.3~~ C.1.7.6.2. and C.1.7.6.4.**		The Provider's monthly invoice payment will be reduced by five percent (5%) of the invoice total, for each month that this standard is not met.	

Change No. 5

Standard Contract Part 2, Attachment 1, Minimum Performance Measure ~~#6~~ #7

~~5.~~ 6.	KPI Tool **Section ~~C.1.7.8.2.~~ C.1.7.7.6.**		The monthly invoice payment will be reduced by 5% of the invoice total for each month that this standard is not met.
~~6.~~ 7.	The Provider shall submit accurate and complete monthly reports, ~~quarterly reports,~~ and annual reports to the Department within the contractual timeframe.		If the required complete reports are not received by the 20th calendar day following the end of the month for which payment is being requested, the monthly invoice payment will be reduced by 2% of the invoice total. If the required complete reports are not received by the 30th calendar day following the end of the month for which payment is being requested, the monthly invoice payment will be reduced by 5% of the invoice total. These reductions will apply for each month that the reporting standard is not met.
Records			
~~7.~~ 8.	The Provider shall submit to the Department or its designee, all records and data generated by this Contract no later than 60 calendar days following the expiration of this Contract.		The Department may withhold the final monthly payment amount until all records are submitted.
~~8.~~ 9.	The Provider shall comply with public records laws, in accordance with §119.0701, Florida Statutes.		$5,000.00 for each incident in which the Provider does not comply with a public records request.
~~9.~~ 10.	Disaster Recovery Plan shall be finalized no later than thirty (30) calendar days prior to the Contract effective date.		The Provider's monthly invoice payment will be reduced by five percent (5%) of the invoice total, for each month that this standard is not met.

Change No. 6

Standard Contract Part 2, Attachment 3, Financial Compliance

See Attachment to this Addendum.

Change No. 07

Standard Contract Part 2, Exhibit C, Task List, C.2.1.1.20.

Qualified Evaluator (QE). The Provider shall maintain a minimum network of at least 20 Qualified Evaluators, as defined in §39.407(6), Florida Statutes. The QEs performing Residential Treatment Center or hospital assessments must meet the applicable psychiatrist or psychologist qualification requirements for those assessments. Qualified mental health counselors may be included in the 20 QE network when they are qualified to perform the applicable Therapeutic Group Home assessments.

~~Each QE shall be a Florida-licensed psychiatrist or psychologist with at least three (3) years of experience in diagnosing and treating serious emotional disturbances in children and adolescents, with no conflict of interest with any inpatient or Residential Treatment Center.~~

Standard Contract Part 2, Attachment 1, Minimum Performance Measure # 1.

1.	The Provider shall maintain a network of at least twenty (20) Qualified Evaluators (QEs), at least one (1) of whom shall be a Seminole Tribe Qualified Evaluator (STQE). One hundred percent (100%) of QEs shall meet the applicable qualifications for the assessment(s) they perform, including any applicable psychiatrist or psychologist requirements for RTC or hospital assessments. Qualified mental health counselors who are qualified to perform TGH assessments may be counted toward the minimum twenty (20) QE network requirement. ~~One hundred percent (100%) Qualified Evaluators collectively satisfy §39.407(6)(b)1. and 2., F.S. and shall be a Florida-licensed psychiatrist or psychologist who has at least three (3) years of experience in the diagnosis and treatment of serious emotional disturbances in children and adolescents and who has no actual conflict of interest with any inpatient or residential treatment center or program.~~		The Provider's monthly invoice payment will be reduced by five percent (5%) of the invoice total, for each month that this standard is not met.	

Change No. 08

Standard Contract Part 2, Exhibit D, Deliverable #5

5.	KPI Tool	Due within 30 business days of Contract execution	1 Electronic copy	**Section ~~C.1.7.8.2.~~ C.1.7.7.6.**

Change No. 09

Standard Contract Part 2, Exhibit C, Section C.1.5.

QEN Management. The Provider shall manage the QEN and ensure a seamless integration and collaboration for the STQEs to become part of the Provider's system. The Department will provide the STQEs' contact information to the Provider. The Provider shall be responsible for all costs associated with required Child and Adolescent Needs and Strengths (CANS) training and certification for its Qualified Evaluators (QEs), including any initial and renewal training or certification costs necessary to maintain compliance with the requirements of this Contract.

Addendum No. 02 with Written Inquiry Responses
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Response to Written Inquiries:				
Question #	Vendor Name	Solicitation Section	Question	Department Response
1	Magellan Healthcare	Standard Contract Part 2 Section C.1.3.1., p 6	Section C.1.3.1 state "The Provider shall maintain an acceptable Quality Improvement Organization-like entity (QIO) status as approved by the CMS." Section A.1.1.24 defines QIO-like as " an organization that performs similar activities to a QIO and can be contracted to perform medical and utilization reviews." Given the scope does not include medical and utilization reviews, please confirm whether or not QIO-like status is still required.	Yes. QIO-like status, as described in **Section C.1.3.1.**, remains a requirement of this solicitation. The Department intends for the Provider to possess demonstrated experience and organizational capabilities comparable to a Quality Improvement Organization (QIO), including quality oversight, utilization review principles, and quality improvement functions. A formal CMS-designated QIO is not required.
2	Magellan Healthcare	Standard Contract Part 2	Part 2 C.1.6.2.3 & C.1.7.1.10.2 requires Initial suitability assessments are to be completed within 7 business days from referral. However, Attachment 1 states completion within 5 business days. Please clarify correct turnaround times.	Initial suitability assessments are to be completed within seven (7) calendar days from referral. Refer to **Change No. 03.**
3	Magellan Healthcare	Standard Contract Part 2, pg 11	Part 2 C.1.7.1.3 states the method that OOS assessments are to be conducted, however there is no mention of turnaround times. Please confirm if OOS assessments are conducted within the same timeline as the suitability assessments.	Unless otherwise specified in the solicitation, Out-of-State Assessments shall follow the same applicable turnaround requirements as Initial Suitability Assessments. Refer to **Change No. 01.**

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4	Magellan Healthcare	Standard Contract Part 2 & Attachment 1, p 14&17	Part 2 states Reconsiderations are to be scheduled within 11 calendar days. However, Attachment 1 states, within 14 business days. BQRTP Reconsideration states, scheduling the assessment within 5 calendar days and all other steps within the BQRTP Reconsideration process (according to Attachment 1) are all within business days. Please clarify that all turnaround times are business days and not calendar days.	Refer to **Change No. 04**.
5	Magellan Healthcare	Standard Contract Part 2 & Attachment 1, p 16	Part 2 C.1.7.6.1 requires BQRTP Preliminary Assessments are to be completed within 3 business days from receipt of referral. However, Attachment 1 states, completion within 5 business days. Please clarify correct turnaround times.	Refer to **Change No. 03**.
6	Magellan Healthcare	Part 2 C.1.7.6.2.3 Standard Contract Part 2	Part 2 C.1.7.6.2.3 states, The provider must submit the Full BQRTP Assessment to the Lead Agency within 30 days of the child's placement in a BQRTP." Please clarify whether this is business or calendar days.	Refer to **Change No. 02**.

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7	Magellan Healthcare	Standard Contract Part 2 Section C.2.1.1.14, p 20	C.2.1.1.14. states that "staff shall be available at the Provider's office location during normal business hours (8:00 AM to 5:00 PM, Eastern Time, Monday through Friday, excluding State of Florida observed holidays)." Assuming that the provider has an office location for any in-office needs, is it acceptable to provide a remote staffing model?	Yes. The Department will permit a remote staffing model, subject to Department approval, provided the Provider maintains a Florida office location as required by the Contract, maintains a sufficient percentage of clinical review staff at the office location as determined by the Department, and all contractual service, accessibility, security, and performance requirements are met. The Department reserves the right to approve or disapprove the number of staff permitted to telecommute.
8	Magellan Healthcare	Standard Contract Part 2 Section C.2.1.1.20., p 21	Section C.2.1.1.20. states "the Provider shall maintain a minimum network of at least 20 Qualified Evaluators." Please provide a data book or estimated number of assessments per month/year to assist in justification of 20 Qualified Evaluators. If the vendor determines that the estimated assessment volume warrants an alternative staffing model, will the State accept a model with fewer qualified evaluators with a guaranteed assessment capacity?	The minimum requirement of twenty (20) Qualified Evaluators reflects the Department's determination of the minimum staffing necessary to support statewide coverage, required turnaround times, geographic availability, and continuity of operations. Estimated assessment volumes are provided in **Appendix VIII**, Proposed Annual Payment Table, of the RFP. The requirement to maintain a minimum network of twenty (20) Qualified Evaluators remains unchanged. A staffing model containing fewer than twenty (20) Qualified Evaluators would not meet the minimum requirement of **Section C.2.1.1.20**. Respondents shall propose staffing sufficient to meet all contractual requirements.
9	Magellan Healthcare	Standard Contract Part 2 Section C.2.1.1.20.1., p 21	Section C.2.1.1.20.1. states "QEs shall be available 24/7 to complete assessments outside regular business hours, using either existing staff or subcontracted services." Given the current approved practice of an immediate placement recommendation, would 24/7 availability still be required?	Yes. The requirement for 24 hours per day, seven days per week availability remains unchanged. This requirement ensures the Provider is capable of responding to referrals and assessment needs occurring outside normal business hours.

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10	Magellan Healthcare	Standard Contract Part 2 Section C.2.4, p 24	In row nine of the table of administrative documents in Section C.2.4. the State mentions attachment 3, please confirm if this mention if correct and if so, provide attachment.	Refer to **Change No. 06**.
11	Magellan Healthcare	Standard Contract Part 2	Section C.2.5. indicates the reporting schedule including monthly and annual reports. However, Attachment 1 requires monthly, quarterly and annually. Please clarify if a quarterly report is required.	Refer to **Change No. 05.**
12	Magellan Healthcare	Standard Contract Part 2, p 6 & 7	Section C.1.3.6. states "The Provider shall also furnish the Department with secure API access to required data". Please confirm what required data must be sent via API.	The API requirement is intended to support secure electronic exchange of contract-related data, including assessment status, referral tracking, performance reporting, and other information reasonably required for contract administration. The specific API requirements will be mutually coordinated during implementation. No specific technology platform is prescribed by the solicitation.
13	Healthcare & Emergency Solutions		What percentage of clinical staff must work from the Florida office?	The solicitation does not require a specific numerical percentage of clinical staff to work from the Florida office. However, pursuant to **Section C.2.1.1.15**, the Provider shall maintain a sufficient percentage of clinical review staff at the office location, as defined by the Department. Telecommuting is subject to Department approval in accordance with **Sections C.2.1.1.16** and **C.2.1.1.17**. Respondents are responsible for proposing a staffing model that complies with all solicitation requirements and ensures timely, statewide service delivery.
14	Healthcare & Emergency Solutions		Can the required Florida office be located in a secure coworking or shared office space?	Yes. The Florida office may be located in a secure coworking or shared office environment, provided the Provider maintains a dedicated business presence in Florida and complies with all confidentiality, security, HIPAA, and contractual requirements. The Provider remains responsible for ensuring adequate space, security, accessibility, and performance under the Contract.

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15	Healthcare & Emergency Solutions		Who is responsible for the cost of CANS training and certification?	The Provider shall be responsible for all costs associated with training and certification of its personnel, including Child and Adolescent Needs and Strengths (CANS) training and certification, unless otherwise expressly stated in the Contract. Refer to **Change No. 09**.
16	Healthcare & Emergency Solutions		How many contracts does DCF expect to award?	The Department anticipates making one (1) award as a result of this solicitation; however, the Department reserves the right to make additional awards if determined to be in the best interest of the State.
17	Healthcare & Emergency Solutions		Will the award be statewide, regional, or divided by assessment type?	The Department intends to award a Contract for statewide services. Respondents shall propose a solution capable of providing services throughout the State of Florida in accordance with the solicitation requirements.
18	Healthcare & Emergency Solutions		Does DCF require a specific mix of psychiatrists, psychologists, and licensed mental health counselors within the 20-member network, and may counselors qualified for Therapeutic Group Home assessments count toward the required minimum of 20 evaluators	The solicitation does not require a specific mix of professions within the Qualified Evaluator Network. The Provider shall ensure that all Qualified Evaluators meet the applicable qualifications required by Florida law, administrative rule, and the Contract for the assessments they perform. Qualified Evaluators who are authorized to perform the required assessment types under the Contract may count toward the minimum network requirement, provided all contractual qualifications are met. Refer to **Change No. 07**.
19	Healthcare & Emergency Solutions		Can DCF identify the state and federal funding sources that will support this contract?	The Department anticipates that funding for this Contract will be provided through annual legislative appropriations and Department allocations. The services are associated with the Florida Medicaid program, and federal funding requirements may apply to the extent federal funds are used. Funding is subject to appropriation and availability of funds.
20	Healthcare & Emergency Solutions		What is the anticipated annual funding amount and total not-to-exceed budget for this contract?	The anticipated funding available over the three-year Contract term is approximately $5,091,334, contingent upon legislative appropriation and availability of funds. This estimate is provided for informational purposes only and does not guarantee funding at this level.