

STATE OF ALASKA

Department of Health
Division of Behavioral Health



TTI Rapid Access

RFP 2024-1600-0357

Amendment #2

August 12, 2024

This amendment is being issued to answer questions submitted by potential offerors.

Offerors should use Submittal Form A – Offeror Information to acknowledge this amendment.

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Questions submitted by potential offerors and answers from the State:

Question 1: The recently posted solicitation for a Behavioral Health Provider Support Organization included a capacity assessment component and creation of a website with service information. What does DBH see as the core differences between the capacity assessment described in the BHPSO RFP and the landscape analysis described in the TTI Access RFP? Will there be opportunities to collaborate and share information with the BHPSO once a vendor is selected to avoid creation of duplicative assessments and places where information about providers will be posted?

Answer: DBH is focused on creating a bidirectional approach to integration. The purpose of the TTI Rapid Access RFP is to provide behavioral health resources and support to front line medical providers such as primary care providers, and hospitals who serve children and families with behavioral health needs. The RFP stipulates that work can be subcontracted, additionally there are no restrictions regarding agency collaboration.

Question 2: Three of the six service areas in the landscape analysis are specific to children and/or families (b, c, e). Is the intention for the analysis to focus on the behavioral health services available or missing for children and families across all of the identified categories? Stated another way, should outpatient and community-based behavioral health services for adults outside of the family context be included as part of the analysis?

Answer: The intention of the landscape analysis is to focus on available outpatient and community based mental health services specific to children and families, however programs that serve persons across the lifespan to include children and families should be included. Outpatient and community based behavioral health services for adults are not required as part of the analysis.

Question 3: The service analysis excludes residential and inpatient care settings for behavioral health needs. Can you confirm that the focus is on outpatient and crisis levels of care only?

Answer: Yes. The focus of this analysis is outpatient and crisis level care only.

Question 4: Page 10 indicates the service catalog will be distributed to “over 50 professional organization or associated agencies”. Does DBH have a list of the 50 organizations to distribute the materials or is it a requirement of the contractor to identify 50 organizations/agencies?

Answer: DBH will provide a list of professional organizations for the contractor to distribute the resource to. This will be primarily done through list servs. The contractor will assist in collecting data from the professional organization regarding the number of providers the service catalog was sent to on the list serv.

Question 5: What information will DBH be able to provide to inform the landscape analysis?

- Names of organizations enrolled with Alaska Medicaid as Community Behavioral Health providers?
- Lists of the 1115 Waiver services each agency has applied to provide?
- Lists of services actually provided by organizations (using claims data)?

Answer: Yes. DBH will partner with the selected vendor to support needs for data related to Medicaid and grants.

End of Amendment #2