# STATE OF ALASKA

Department of Corrections
Division of Administrative Services

# Comprehensive Behavioral Health Services

RFP 2027-2000-0099

**Amendment #2**

November 5, 2026

**This amendment addresses the Q&A with potential offerors and changes to the RFP.**

**Important Note to Offerors:** You must sign and return this page of the amendment document with your proposal. Failure to do so may result in the rejection of your proposal. Only the RFP terms and conditions referenced in this amendment are being changed. All other terms and conditions of the RFP remain the same.

Procurement Officer Name
Procurement Specialist 3
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_____
COMPANY SUBMITTING PROPOSAL

_____
AUTHORIZED SIGNATURE

_____
DATE

## Questions submitted by potential offerors and answers from the state:

**Question 1:** RFP 2027-2000-0098 lists Anvil Mountain, Ketchikan, Spring Creek, and Yukon-Kuskokwim Correctional Centers as locations served on an as-needed basis. Is RFP 2027-2000-0099 intended to replace that coverage, and will RFP 2027-2000-0098 be amended to remove these four facilities?

***Answer:*** *No. RFP 2027-2000-0099 will serve as the primary solicitation for Anvil Mountain Correctional Center (AMCC), Ketchikan Correctional Center (KCC), Spring Creek Correctional Center (SCCC), and Yukon-Kuskokwim Correctional Center (YKCC). RFP 2027-2000-0098 will provide coverage for these four (4) facilities on an as-needed basis only.*

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**Question 2:** If the four facilities remain in RFP 2027-2000-0098, how will the Department route staffing requests at these locations between the RFP 2027-2000-0099 contractor and the RFP 2027-2000-0098 contractors?

***Answer:*** *RFP 2027-2000-0099 is the primary contract for AMCC, KCC, SCCC, and YKCC locations. Please refer to Section 3 for the Scope of Work and Contract Information. RFP 2027-2000-0098 will serve as a backup contract for these facilities.*

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**Question 3:** The RFP 2027-2000-0098 cost proposal averages hourly rates across all listed locations, including these four facilities. If they are removed from that solicitation, will its cost form be revised so offerors price only the remaining locations?

***Answer:*** *No, it will not be removed from RFP 2027-2000-0098 solicitation. The cost proposal form will not be revised.*

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**Question 4:** May a single offeror be awarded both contracts?

***Answer:*** *Yes.*

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**Question 5:** If so, may a clinician assigned under one contract provide telehealth coverage under the other, provided hours are billed separately by contract?

***Answer:*** *Yes.*

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**Question 6:** Section 1.14 states that one contract will be awarded, while Sections 1.02 and 3.03 refer to multiple contractors, a shared funding pool, and requests issued to all contracted vendors. Please confirm this will be a single award.

***Answer:*** *It is anticipated that the state will issue one (1) contract award for this service.*

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**Question 7:** Attachment 2 lists 2,080 hours per facility. Does the Department anticipate one full-time MHC per facility?

***Answer:*** *Please refer to the amended Attachment 2 – Cost Proposal.*

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**Question 8:** Are these hours an estimate, a maximum, or a guaranteed minimum?

***Answer:*** *Maximum hours per facility.*

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**Question 9:** Section 3.09 references both on-site and traveling MHCs. May one MHC serve more than one facility (for example, telehealth coverage for both AMCC and YKCC)?

***Answer:*** *Yes.*

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**Question 10:** If so, how should those hours be billed against the separate facility rates?

***Answer:*** *Will be billed at the hourly rate for each facility location.*

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**Question 11:** Can the Department share the anticipated annual budget referenced in Section 1.02?

***Answer:*** *The Department is not disclosing the allocated budget for this project. The Department has a limited budget for this project, and negotiations may be necessary.*

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**Question 12:** For each of the four facilities, can the Department share the number of state-employed and contracted MHCs currently in place, the approximate mental health caseload, and whether behavioral health services are currently provided under an existing contract?

***Answer:*** *The department's number of state-employed and contracted MHC's is for internal use only and cannot be shared publicly. Mental health caseload volume fluctuates based on needs, and we do currently have contracts in place for behavioral health services.*

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**Question 13:** Attachment 2 lists travel costs (transportation, lodging, rental car, taxi, mileage) within its description of costs, while Sections 3.05 and 3.10 state that the Department will arrange and pay for travel under AAM 60. Should travel be included in the hourly rate, or will the Department pay it separately?

***Answer:*** *Yes, the Department will only pay for all approved and arranged travel and lodging (when needed) within Alaska. Travel will be arranged by the contractor; however, the Department will reimburse only approved travel and lodging expenses incurred within Alaska.*

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**Question 14:** If the Department pays travel, is clinician travel time billable at the facility rate?

***Answer:*** *No, travel time is not billable.*

**Question 15:** Sections 3.01, 3.02, and 3.05 reference evening and weekend shifts, emergency weekend services, and MHCs staying past scheduled hours. Are those hours billed at the same facility rate, and do they count toward the 2,080 hours? If a separate after-hours or holiday rate is permitted, how should it be submitted given that Attachment 2 prohibits additional information on the form?

***Answer:*** *Yes. After-hours, weekends, and holiday hours may be billed at a different rate if pre-approved by the Department. Although Attachment 2 does not allow additional information to be entered directly on the form, vendors may submit their after-hours, weekends, and holiday rate schedules as a separate attachment to their proposal. All such rates are subject to review and approval by the Department before use.*

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**Question 16:** Section 3.06 identifies this as a Firm Fixed-Price contract, while Attachment 2 establishes hourly billing rates. Please confirm that payment will be based on actual hours worked at the proposed facility rates.

***Answer:*** *Yes, MHC will be paid for the actual hours worked at the facility hourly rate.*

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**Question 17:** Will rates remain fixed through the optional renewal years, or may rates be adjusted at renewal?

***Answer:*** *The department is open to rate/pricing adjustment talks before issuing renewal amendments, subject to budget availability and funding approval.*

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**Question 18:** Section 4.03 asks offerors to itemize the total cost and estimated hours for each named individual, while Attachment 5 states the form must not identify proposed costs. Should that itemization be placed in the sealed cost proposal instead?

***Answer:*** *Yes, you can include your itemization with your cost proposal.*

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**Question 19:** Section 3.07 requires a progress report with each invoice. Can the Department describe the expected content and frequency of that report?

***Answer:*** *The monthly progress report with each invoice includes, but is not limited to:*

- *Turnover rate*
- *Service interruptions and reasons*
- *Summary of critical incidents involving the contractor, staff, or services*
- *Positive developments or client impact highlights.*

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**Question 20:** Section 3.04 states that clinicians must be licensed, while Section 3.05 states that licensure is preferred and that license-eligible clinicians are acceptable. Which standard applies?

***Answer:*** *Both standards apply. Licensed mental health professionals are preferred. However, license-eligible clinicians are acceptable if they meet all requirements to pursue clinical licensure. The department*

*will not provide clinical supervision toward licensure, so the offeror must ensure appropriate supervision is available. All clinicians must meet background check requirements and maintain ongoing competency required by the State.*

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**Question 21:** Section 1.04 states that correctional experience is preferred but not required for individuals, while Section 3.04 states that clinicians must have demonstrated correctional experience. Which standard applies?

***Answer:*** *Sec. 1.04 provides general guidelines for all offerors, indicating that correctional experience is preferred but not required. However, under Sec. 3.04, MHC's providing services at the facilities must be licensed or license-eligible and demonstrate experience providing behavioral health services in a correctional setting.*

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**Question 22:** Must clinicians hold an active Alaska license at the time of referral?

***Answer:*** *Yes. Clinicians must hold an active Alaska license at the time of referral or be license-eligible with a supervision plan towards licensure.*

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**Question 23:** For telehealth clinicians, is an active Alaska license required regardless of where the clinician is physically located?

***Answer:*** *All clinicians providing services under this contract, including telehealth providers, must hold an active Alaska license. Telehealth clinicians must also maintain a valid license and remain in good standing in their state of residence and practice.*

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**Question 24:** Section 3.04 states that clinician resumes are submitted with candidate referrals after award, while Attachment 1 requests resumes and certificates with the proposal. Should the proposal include proposed clinician resumes, or only the resume of the contract manager required under Section 1.04? Which certificates are expected?

***Answer:*** *In Attachment 1, the proposal is required to include only the resume and certifications of the contract manager and the organizational chart. Clinician resumes are not required at the time of proposal submission and will be provided with candidate referrals after the award in accordance with Sec. 3.04.*

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**Question 25:** Do resumes and the organizational chart count toward the five-page limit on Attachment 5?

***Answer:*** *No. There is no proposal page limit for this RFP.*

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**Question 26:** Section 3.09 states the Department will not provide remote workspace but will provide workspace in Anchorage. Must telehealth MHCs work from the Department's Anchorage workspace, or may they deliver services from another secure location?

***Answer:*** *Telehealth can be delivered from another secure location.*

Must telehealth MHCs be located in Alaska?

***Answer:*** *No.*

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**Question 27:** Will the Department provide the equipment, EHR access, and telehealth platform used for remote sessions, or is the contractor expected to supply them?

***Answer:*** *The department will provide EHR and VPN access. All other items must be provided by the offeror. Security and workplace standards must comply with HIPAA and CJIS.*

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**Question 28:** For the required monthly onsite visits to AMCC, KCC, and YKCC, does the Department expect a minimum visit length?

***Answer:*** *We are not setting a minimum visit length for the comprehensive services. However, the department expects each MHC monthly onsite visit to be sufficient duration to complete required deliverables and facilitate trainings.*

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**Question 29:** For facilities served primarily by telehealth, should the in-person suicide prevention training sessions be scheduled during the monthly onsite visits? Are training hours billed at the facility rate within the 2,080 hours?

***Answer:*** *The trainings will have to be coordinated with security and vary by facility. The trainings are billed as part of the regular working days and are included in the hours.*

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**Question 30:** If the SCCC clinician has an unplanned absence, is temporary telehealth coverage acceptable while an in-person replacement is deployed, given the 8-working-hour correction period in Section 3.20?

***Answer:*** *The offeror should include in the proposal a clear procedure for managing both expected and unexpected leave, including the requirement to submit leave requests through the agency so that the agency can provide timely notification to the Chief Mental Health Officer (or designee). The Chief Mental Health Officer (or designee) will coordinate with the agency and facility leadership to ensure continuity of operations. When necessary, an emergency coverage plan will be developed, with sufficient notification provided to facility staff.*

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**Question 31:** Section 3.01 references supervision of staff, and Section 3.15 references program directors and clinical supervisors. Does the Department expect the contractor to provide a designated clinical supervisor or lead clinician? If so, is that role billable?

***Answer:*** *The agency is expected to provide all supervision for the execution of services. We are not dictating how this should be done besides saying there must be clinical and administrative oversight. The agency should bid on the price based on what they think is needed to provide comprehensive services, including oversight roles.*

**Question 32:** Section 3.05 asks the contractor to track outcomes such as stabilization, recidivism reduction, and treatment engagement. Will the Department provide the EHR reports or data needed for that tracking?

***Answer:*** *Yes.*

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**Question 33:** Section 3.19 refers to contracts of $1,000,000 or more to Risk Management for professional liability limits. What limits should offerors plan for under this contract?

***Answer:*** *The department is not disclosing the contract amount at this time. The contractor will know the minimum required limit after reviewing the contract.*

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**Question 34:** Should vendors expect any changes to the scope, staffing needs, or overall requirements of RFP #2027-2000-0098 as a result of this new RFP?

***Answer:*** *No.*

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**Question 35:** Sec. 3.01 requires weekly mental health rounds in segregation units. At AMCC, KCC, and YKCC, where on-site visits are required at least monthly, may weekly segregation rounds between visits be conducted by telehealth?

***Answer:*** *Yes. However, the offeror must provide a balanced plan for the delivery of services, allowing both in-person and telehealth methods. A detailed plan must be included in the proposal. This proposal shall include at least monthly on-site visits to each of the three (3) facilities: AMCC, KCCC, and YKCC.*

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**Question 36:** May a letter of reference come from a current Department of Corrections employee who works with the offeror under an existing contract?

***Answer:*** *No.*

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**Question 37:** Are letters of reference treated as supporting exhibits outside the five-page limit for Attachment 5?

***Answer:*** *No. There is no proposal page limit for this RFP.*

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**Question 38:** Will the department provide housing for Mental Health Clinicians working on site at Anvil Mountain Correctional Center (Nome) and Yukon-Kuskokwim Correctional Center (Bethel) under the resulting contract?

***Answer:*** *No.*

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**Question 39:** If housing will be provided at either facility, may offerors submit a separate hourly rate for that facility reflecting department-provided housing, either on the Cost Proposal Form or on a separate page attached to the cost proposal as the form allows?

***Answer:*** *Housing will not be provided.*

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**Question 40:** Will the State's responses to questions submitted under RFP 2027-2000-0098 also apply to RFP 2027-2000-0099? Specifically, regarding:

- Independent-contractor clinicians serving as subcontractors (Sec. 3.11)
- Qualified offeror requirements (Sec. 6.16)
- Workers' compensation requirements
- Professional liability limits
- Licensure requirements
- Alaska bidder/offeror preference requirements

***Answer:*** *Yes. However, each solicitation is treated separately, with its own set of terms, attachments, and amendments.*

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**Question 41:** How many Mental Health Clinician (MHC) positions or FTEs are anticipated at each facility (AMCC, KCC, SCCC, and YKCC)?

***Answer:*** *We have 2 FTEs at SCCC and a shared FTE for AMCC, KCC, and YKCC.*

Does the 2,080-hour annual estimate shown on the Cost Proposal Form represent one full-time position per facility?

***Answer:*** (*The Cost Proposal Form has been amended.) This is comprehensive services; the agency/contractor will need to decide how many people to include.*

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**Question 42:** Section 3.01 requires the contractor to "provide and manage" services, including supervision of staff. Does this require clinical supervision by the offeror, or administrative management, with clinical direction provided by the Chief Mental Health Officer and Chief Psychiatrist? Would a licensed supervising clinician contracted by the offeror satisfy this requirement?

***Answer:*** *The offeror will provide all oversight, including clinical oversight. This is a comprehensive services contract.*

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**Question 43:** May telehealth services for AMCC, KCC, and YKCC be delivered by Alaska-licensed clinicians located outside Alaska?

***Answer:*** *Yes, Alaska-licensed clinicians can provide telehealth services to patients in Alaska even if they're located outside the state.*

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**Question 44:** Beyond the required monthly on-site visit, is there a minimum ratio of in-person to telehealth hours for AMCC, KCC, and YKCC? Please also confirm that "KCCC" in Sec. 3.01 refers to KCC.

***Answer:*** *No.*

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**Question 45:** For telehealth, will the Department provide equipment, EHR access, and network connectivity to remote clinicians? If not, what security and workspace standards (HIPAA, CJIS) must the offeror meet?

***Answer:*** *The department will provide EHR and VPN access. All other items must be provided by the offeror. Security and workplace standards must comply with HIPAA and CJIS.*

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**Question 46:** Sec. 3.10 states that the Department will arrange travel, but the Cost Proposal Form requires travel costs to be included in the hourly rate. For the required monthly on-site visits, should airfare, lodging, and ground transportation be included in the hourly rate, or will the Department arrange and pay for them?

***Answer:*** *The department will only pay for all Department-approved and arranged travel and lodging (when needed) within Alaska.*

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**Question 47:** Are telehealth hours and travel time billable at the proposed hourly rate?

***Answer:*** *Travel time is not billable. Time providing client care at the facility and telehealth are billable.*

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**Question 48:** Is cost scored on the Average Cost (Total Cost ÷ 4) shown on the Cost Proposal Form, or on Total Cost?

***Answer:*** *Please refer to the amended cost proposal.*

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**Question 49:** Does the 30-day discontinuation provision in Sec. 3.02 apply to individual clinicians only, or may the Department discontinue services at an entire facility? Is any minimum volume guaranteed?

***Answer:*** *Please see **Sec. 3.20 Service Contract Deficiencies**.*

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**Question 50:** These four facilities are also listed as as-needed locations under RFP 2027-2000-0098. If different offerors are awarded each contract, which contract takes priority at these sites?

***Answer:*** *This contract will be the priority for these locations.*

May the same offeror be awarded both?

***Answer:*** *Yes.*

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**Question 51:** Will the Department provide training on assigning mental health classification codes (Sec. 3.01)?

***Answer:*** *The department will provide the criteria.*

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**Question 52:** Are you currently able to fill all of the positions required under the existing contract? If not, which roles are open or understaffed?

***Answer:*** *Yes. The structure of the current contract is different.*

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**Question 53:** What has caused the staffing gaps, such as recruitment timelines, credentialing delays, licensure requirements, or candidate availability?

***Answer:*** *For contracted staff, we do not currently have significant gaps. For SOA staff, there is a workforce shortage in Alaska.*

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**Question 54:** How long have the current vacancies been open, and what is your plan and timeline to fill them?

***Answer:*** *We have contractors in the SOA vacancies.*

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**Question 55:** What steps have you taken to maintain coverage while positions remain unfilled?

***Answer:*** *Contracts.*

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**Question 56:** Are there specific service standards or performance requirements under the current contract that you have not been able to meet? If so, which ones?

***Answer:*** *These are different RFPs with different requirements.*

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**Question 57:** What issues have you identified in clinical or operational quality, and what corrective actions have you taken?

***Answer:*** *The department will not disclose any information regarding this question.*

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**Question 58:** How are you monitoring service quality, and what measures or reporting are you using to track performance?

***Answer:*** *We have a robust EHR system that we utilize for reporting. Additionally, we have quality assurance measures in which management, SOA staff, and contract staff are required to participate.*

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**Question 59:** What support, resources, or process changes would help you meet the contract's quality expectations?

***Answer:*** *Please see **Sec. 3.01 Scope of Work**.*

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**Question 60:** Do the current contract rates allow you to recruit and retain qualified staff at a sustainable level? If not, what changes would be needed?

***Answer:*** *This is a completely different contract and would not apply.*

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**Question 61:** Have unexpected costs, such as travel, credentialing, or market rate increases, affected your ability to perform under the current pricing structure?

***Answer:*** *This RFP is for comprehensive services, and it's different from the current contract.*

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**Question 62:** Does the State require resumes for proposed clinicians to be submitted with the proposal, or only after award when staffing requests are issued?

***Answer:*** *Clinicians' resumes are only required after the contract is awarded.*

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**Question 63:** If clinician resumes are required with the proposal, is there a minimum or maximum number of resumes that should be submitted?

***Answer:*** *See question #62 answer.*

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**Question 64:** Are resumes for key personnel and/or proposed clinicians included within the five-page limitation applicable to the Experience and Qualifications section?

***Answer:*** *There is no proposal page limit for this RFP.*

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**Question 65:** Is the required organizational chart included within the five-page limitation, or may it be submitted separately as an appendix?

***Answer:*** *No. There is no proposal page limit for this RFP.*

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**Question 66:** Are resumes, supporting credentials, certificates, and organizational charts considered attachments that are excluded from the narrative page limitations?

***Answer:*** *No. There is no proposal page limit for this RFP.*

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**Question 67:** Section 3.05 – Reporting and Quality Assurance**:** Is the contractor expected to provide organizational-level clinical oversight and monitor provider performance and program outcomes, or will the contracted clinicians participate in the facilities' existing quality management processes?

***Answer:*** *Contracted clinicians will participate in the facilities existing quality management process.*

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## Changes to the RFP:

**Change 1:** The Proposal Deadline Date and Time will be extended to **November 25, 2026 @ 2:00 PM.**

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**Change 2:** Start of the Contract Term has been amended.

**SEC. 3.02 CONTRACT TERM AND WORK SCHEDULE**

The contract term will run from the date of award (approximately **April 1, 2027**) through **June 30, 2027**, with three (3) optional 1-year renewals through **June 30, 2030**. All optional renewals are dependent upon legislative appropriation and programmatic needs.

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**Change 3:** Travel Requirements changes

**SEC 3.01 TRAVEL**

The Contractor is responsible for arranging all travel associated with the services, including travel from outside Alaska to the facility. The Department will reimburse only allowable travel expenses incurred within Alaska, in accordance with the State of Alaska's AAM 60 Travel regulations. All traveling MHCs must comply with the applicable provisions of AAM 60 Travel. (See AAM 60 Travel: https://doa.alaska.gov/dof/manuals/aam/resource/60t.pdf).

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**Change 4:** The Cost Proposal Form has been amended. In order to be considered responsive, offerors must use the amended Cost Proposal Form on the following page.

# Attachment 2

# COST PROPOSAL FORM

# RFP #2027-2000-0099

Offerors **must** use this form to enter data that will be utilized for evaluation purposes and to convert the cost to points.

The rate per hour proposed shall include all direct and indirect costs associated with performance of the services required herein. (Direct cost of the individual's time providing the direct service that includes, but is not limited to, personnel costs and fringe benefits. Indirect costs associated with the performance of this contract include, but may not be limited to, insurance, supplies, overhead, etc. Travel costs associated with the performance of this contract include, but may not be limited to, out-of-state transportation, lodging, rental car, taxi, mileage, etc.)

Costs on this form are for 12 months or one (1) year of service. Partial fiscal year service periods will be prorated accordingly *(if applicable).* The purpose is to submit costs in a manner DOC can evaluate and score and then use to establish billing rates for the resultant contract.

| **Comprehensive Behavioral Health Services** | |
|---|---|
| **Description** | **Total Cost per Year** |
| **Comprehensive Services**<br>Includes but is not limited to:<br>• Mental Health Clinicians<br>• In-person & Telehealth<br>• Staff Oversight/Supervision of Staff<br>• Administrative Services and Support<br><br>Direct and Indirect Costs | *(**AMCC** – 1,030 max. no. of hours for comprehensive services)*<br>*Monthly on-site visit and limited telehealth option*<br>**Hourly Rate $_____ X 1030 hrs. = $_____**<br><br>*(**KCC** – 850 max. no. of hours for comprehensive services)*<br>*Monthly on-site visit and limited telehealth option*<br>**Hourly Rate $_____ X 850 hrs. = $_____**<br><br>*(**YKCC** – 1,240 max. no. of hours for comprehensive services)*<br>*Monthly on-site visit and limited telehealth option*<br>**Hourly Rate $_____ X 1240 hrs. = $_____**<br><br>*(**SCCC** – 5,500 max. no. of hours for comprehensive services)*<br>*Services for this location must be delivered in person*<br>**Hourly Rate $_____ X 5,500 hrs. = $_____** |
| **TOTAL COST** *(used for evaluation purposes)* | **$** |

Proposals must be submitted under the name as it appears on the person's current Alaska business license in order to be considered responsive. Do not enter additional information on this form. If necessary, use a separate page and attach it to the cost proposal.

Print Name: _____

Signature: _____

Date: _____

Organization: _____