Allegheny County Department of Human Services Q&A for RFP for Re-procurement of Family Preservation Services: Case Management, Agency-Delivered Home Management, Kin-Delivered Home Management and Parenting Skills

Thursday, June 9, 2026

1. **The RFP states that all referrals will come from DHS. Does that prohibit referrals from other sources? If so, what prevention and diversion will be funded, if any?**

   While providers have the ability to offer the same service to families outside of the DHS network, this contract will only be for families referred to the services by a DHS entity. To meet prevention and diversion needs, cases investigated by CYF but not opened will also be eligible for referrals to the services noted in this RFP.

Thursday, July 16, 2026

2. **The Response Form states that the narrative response to the requirements section may not exceed three pages, excluding pages 1 through 3. Since the numbered questions themselves span several pages, should proposers retain the full question text and respond beneath each question, or should the question text be removed so that only the responses count toward the three-page narrative limit?**

   The question text should be removed so that only the responses count toward the three-page narrative limit.

Information Session Questions – Thursday, July 16, 2026

1. **Is there an expected number of families to be served? Is there an expected amount for each provider to request?**

   The RFP and slides list the expected number of families for each service. These numbers are DHS's best estimates. DHS anticipates procuring multiple providers for each service. Providers should assess the maximum number of clients they can serve and provide a budget based on that.

2. **Should providers submit proposals for the full number of families listed, or can they propose serving fewer families?**

   Providers should assess the maximum number of clients they can serve and submit a budget aligned to that capacity.

3. **Is this open to new providers, or have providers already been selected?**

   This procurement is open to both existing and new providers.

4. **Can you explain the "option to bid"?**

   It refers to "Intent to Bid." In Bonfire, the RFP posting includes a button that says "Intent to Bid," and providers must notify DHS within the specified timeframe if they intend to bid.

5. **Are the families being served in these programs likely to be receiving additional behavioral health services through HealthChoices Medicaid?**

   The overlap is high (in 2025, around 65% of parents active on a CYF case were HealthChoices enrolled). Families may be receiving other services concurrently. However, these services are not paid by Medicaid; they are funded through Act 148. These are not HealthChoices eligible costs.

6. **Will in-home services, as they currently exist, still be an option after successful completion of this process?**

   No. In-home services as they currently exist will not be an option after successful completion of this process. These services are intended to replace the existing in-home suite.

7. **Are there any niche populations identified (e.g., geographic regions, parents with incarceration) that could be included as a focus?**

   Providers may propose additions or categories. DHS is willing to consider how proposals align with what DHS intends to buy.

8. **What happens if the number of expected families exceeds projections?**

   The numbers are estimates. DHS has limited funding and will purchase as much service as possible within those limits. The goal is to serve the most families possible.

9. **Who are the current providers, and is this a renewal?**

   DHS will reach out to all providers in the existing in-home continuum. The intent is to replace current services with the new suite of services. DHS will clarify which services are included and excluded for providers offering multiple services.

10. **Does DHS expect multiple providers per service category?**

    Yes. DHS anticipates procuring multiple providers for each service.

11. **Can you clarify on the kin stipend? Is there a set rate?**

    A stipend payment model was chosen for the kin-delivered home management service because it is a short-term service being offered. There is not a set rate for stipends. Proposers should present a rate that reflects the effort given by kin and fits within a reasonable proposed budget.

12. **Are providers required to implement FFT under case management? Must they budget for FFT training?**

    Proposers seeking to offer the case management service are required to implement FFT-CW low-risk track. More information on the model can be found in the appendix of the RFP. DHS will work with successful proposer(s) to stand up FFT-CW low-risk track. For the purposes of submitting a proposed budget, please estimate training costs for FFT-CW low-risk track at $5,000 per staff member.

13. **For Parent Education: If a provider offers both Nurturing Parenting and Triple P, can they utilize both? Must they submit separate proposals?**

    Proposers that are interested in offering both Nurturing Parenting and Triple P are able to submit a proposal for both. Proposals must be submitted separately.

14. **How will the fee-for-service/per diem reimbursement model work after the initial cost-reimbursement year?**

    Following program stand-up, the CYF Business Office will work with successful proposers to implement a fee-for-service rate that is reasonable and effectively covers program costs per client. If there is a minimum amount required for the program to be operational, this should be specified in the budget narrative.

15. **Is the future reimbursement structure negotiable as a weekly or monthly case rate instead of per diem?**

    The fee-for-service reimbursement rate is negotiated and set on an annual basis.

16. **What minimum service requirements must be met to bill successfully?**

    Providers may bill only for services that are delivered pursuant to an authorized referral, occur within the approved service period, meet the minimum service requirements established in the final contract and Work Statement, and are documented in accordance with the CYF Contract Specifications Manual and applicable billing requirements. Claims must reflect services actually delivered and be supported by

complete and timely documentation. The specific unit of service and any minimum service intensity (e.g., direct contact, face-to-face requirements, frequency of service, and allowable indirect activities) will be defined in the final contract documents.

17. **Can required face-to-face service hours be split across multiple visits?**

    Face-to-face service hours can be split across multiple visits. At least 50% of the total hours spent on a case should be face-to-face.

18. **Are providers expected to maintain physical office space within Allegheny County?**

    Providers do not have to maintain a physical office space within Allegheny County if the model of the proposed service only includes home visits. If a physical office space was to be used for services offered to families, the location must be accessible to vulnerable families living in Allegheny County.

19. **Are there county expectations regarding supervision, consultation, and local staff presence?**

    Successful proposers will work with DHS to implement the proposed service. There are monitoring requirements performed by DHS Contract Monitors, who continue to work with providers throughout the lifespan of the contract.