

Network Administrator (NA) Virtual Meeting Q&A

Network Administrator (NA) Procurement Process

Q: Did you say that the NA for Regions 3, 4, 5 and 6 won't be covering all regions?

A: Each region will be an independent catchment area. Prospective NAs could bid to be the NA for multiple regions.

Q: Can you please explain how this will specifically help rural areas?

A: The NA will be responsible for developing new providers and increasing provider availability to cover rural areas with limited providers.

Q: Please expand on how this works for programs that are specifically set up for certain populations and referrals.

A: Within specialty areas, the NAs would need to make considerations. We are still having additional conversations about how we will move forward with this work with Tribal Nations. That warrants additional discussion to make sure we are working effectively with Tribal families.

Q: Do you have a desired number of administrators you would like to have? Or will this be based on the submitted bids and determined after they are all in?

A: There is not a predetermined number of administrators we are hoping for. There will be six catchment areas defined by regional boundaries. Each catchment area will have one NA, and prospective NAs may bid to cover multiple catchment areas.

Q: It was mentioned that right now referrals are sent from one agency to the next until accepted and that creates a delay in service to families. This is currently how FIN operates, so would there be a change in how referrals are assigned statewide?

A: Referrals need to be assigned and families served in a timely way. Contract language will be reviewed and requirements clarified, as needed.

Q: Has the department been able to look at and understand data when it comes to why certain referrals are being rejected by multiple agencies? Usually they are the same referrals; such as inconsistent parents, medical needs, or violent cases. The department can work on addressing those specifically.

A: We have not had the data available to understand why referrals are not picked up. We agree we need to better understand why this happens and will continue to work on data needs. We need to provide the services to all the children and families throughout the system and need to have a contract that supports this. There will be more challenges with serving some families than others. The issue will be flagged as a concern for consideration moving forward.

Q: Can you explain further what the plan is for the Region 3-6 for Combined In-Home Services (CIHS)? It was not on the slide with Family Time.

A: For CIHS, it will be practice as usual: continuing to work with Delton Hauck and the regional leads. We are looking at how to provide additional support and infrastructure in the short term, while we determine how to move forward with the NA long term.

Q: How much oversight will the NA have? Has any of this changed based on feedback?

A: NAs will be responsible to provide contract oversight and monitor the performance of their providers. The feedback received to date has been very helpful to inform some of the things we need to address in terms of quality, timeliness and having a sufficient network.

Q: How will data be collected to measure and evaluate that NAs are being effective towards DCYF goals?

A: We are working to establish the data elements that will be collected to measure and evaluate the NAs' effectiveness.

Q: Currently there are many service providers who are contracted in multiple regions and have visit supervisors working in those regions. Can you help us understand how those visit supervisors would be able to work if we are no longer contracted in those regions?

A: You should be able to contract with different NAs across catchment areas.

Q: Concern was shared previously about a Network Provider also being a Service Provider. The concern being the provider would have priority to the visitations and other providers in the area would not. I see the change made is that they don't have to a provider, but the concern is if they choose to be a provider. What will DCYF do about this?

A: We hear that this is a concern, and will refine how this will be addressed based on the feedback we are receiving.

Q: Will the Network Administrator be responsible to update or improve the data collection and analyzing in Sprout, or is that something that will be managed at the DCYF level?

A: Sprout will be managed by DCYF. There will be a strong role for the NA in understanding, monitoring and addressing areas of performance improvement needed within their network.

Q: With the roll out of the new NA, are there planned changes to add further data capacities for providers and NA's to better determine performance and trends?

A: There are data limitations to Sprout and we are exploring how to best move forward. We would like to improve data for providers as well as DCYF. We are working with Information Technology (IT) to identify a platform that will meet the needs of DCYF and our providers.

Q: High quality services require experienced and trained providers. Most of the challenging cases need Family Preservation Service (FPS) prior to Evidence Based Practices (EBPs). Will DCYF consider increasing the FPS rate as the latest increase was minimal?

A: We can explore cost modeling for FPS to determine what rate changes might be needed.

Q: Family Time providers would have a contract with the NA? Just want to make sure I understand this correctly. At past meetings, DCYF mentioned current providers could be an employee, which is not ideal for any of us.

A: By not requiring NAs to be service providers, they would not have their own employees and would need to contract with Family Time providers.

Q: If you have a list of referrals that can't be served, often financially due to no shows and cancels by parents that aren't paid, it makes it appear as though families are not being served. In reality those families have been served repeatedly by many agencies in that area. That data is important in relation to Network Administrators because you cannot have someone come and make new providers, which then ends up with less actual viable referrals for existing providers. This is also why having a provider as the Network Administrator is detrimental to other existing providers as they can take the viable referrals before giving them to all other referrals. What is the plan around this?

A: Data regarding no-shows and cancellations is absolutely important moving forward. We are not asking NAs to be service providers, although current service providers could choose to bid. DCYF hears the concern that equitable distribution of referrals is absolutely necessary and we will seek out language and oversight to ensure this occurs with each NA.

Q: If awarded the contract, how much time would there be to develop our program and build our sub-contractor network before we go live?

A: In Regions 3, 4, 5 and 6, we would look to awards being made sometime in April, with the contract being executed July 1, 2023, and going live with visits October 1. The contracts in Regions 1 and 2 will also be awarded in April, but due to the current contract ending June 30, 2023 we did not have the flexibility for rollout and those networks will need to go live July 1, 2023.

Q: Will NA's in different regions have the authority to set different reimbursement rates resulting in agencies having to operate differently in each region?

A: At this point, we have not made a determination regarding that. We will make sure we are considering this and addressing it moving forward.

Q: Will we be paid by mile zero for travel or will there be any change in that payment amount?

A: The intent is for travel to be continue to be paid from mile zero. At this time, we are not looking at making any changes to payment amounts.

Q: Will there be a fail-safe or anonymous way to state complaints or concerns about the area administrator? Hopefully that won't be needed, but I would think a process around that needs to be clearly noted for this in cases where complaints and concerns made directly to the area administrator are consistently dismissed.

A: We hear your concern and will consider this as we move forward with developing the contract and processes.

Q: Is there a preliminary financial requirement to apply for a NA? And at what capacity is the department providing upfront financial support for NA?

A: No preliminary financial requirement has been established. We have not discussed providing financial support to establish infrastructure. We will take this back for discussion.

Q: Will an application packet be sent out to all contractors to apply as a NA, if interested, and when will that occur?

A: We will be providing more information about procurement timeline soon. We will be sending it out through our network as an open procurement.

Q: I would be interested to know what is the data showing how many families aren't getting visits because of a lack of providers. I am hearing that DCYF doesn't have this data. Is this correct? If the NA's are needed, the data should be provided to us.

A: We have about 6500 kids in out-of-home care and that ends up being about a half a million visits through this network. We are not providing a half a million visits. In many instances, a relative or caseworker has to do it. The data from Sprout is not adequate. We don't have a way of identifying who is getting visits and who is not. We are looking to improve our data systems, and will continue having conversations around this.

Q: Will you continue to accept questions and feedback as in previous meetings?

A: Yes, we would love additional questions and feedback. DCYF plans on having more conversations in the future.

Q: What are the next steps?

A: We will coordinate smaller meetings for conversation with FIN and providers to see what works and understand what could be improved. We will finalize the procurement timeline after some internal meetings. We will set up additional time frames for smaller conversations to give people more of a chance for interaction.

Q: What are some of the other similar models to NAs within DCYF?

A: Early Learning and other systems where they have a large volume of contracts and subcontractors.

Q: I was under the impression that this is being mandated because visits aren't happening. What data was provided to legislation to show NA's were needed?

A: We do not have the data of who is getting visits and who is not. Legislation requires us to expand the NA statewide. This is the next step in the expansion. We believe implementing a statewide NA model will improve outcomes for children, youth and families and increase service availability by reducing service gaps and eliminating wait times.

Q: Will the new contract(s) implement a requirement for fair business practices such as fair and equitable distribution of the referrals? If not, is this something that you intend to discuss?

A: We will absolutely discuss that. We understand from prior feedback that equitable distribution of referrals is a concern.

Q: I am very interested in bidding for the contract of CNA and develop an equitable partnership with the providers in Region 4 and 5. My concern is finding providers that would be willing to service hostile clients. Has DCYF considered exceptions for the CNA to accept all referrals?

A: DCYF is required to make Family Time available to all families with children in out-of-home care. At this time, there are no planned exceptions to the 100% referral acceptance requirement. We will consider your question as we develop the NA contract.