



NEW YORK CITY MAYOR'S OFFICE OF CRIMINAL JUSTICE

COMMUNITY JUSTICE TRANSITION NETWORK RFP

Addendum #4 – EPIN 12826P0006

September 30, 2026

Any provisions of the above-referenced RFP that conflict with the changes below, shall be modified to conform to such changes. This addendum hereby supersedes the solicitation issued on 08/18/2026 and Addendum #1 issued on September 16, 2026, Addendum #2 issued on September 21, 2026, and Addendum #3 issued on September 24, 2026. **The proposal deadline is extended to September 30, 2026 @ 5pm.** Otherwise, all other terms and conditions shall remain in effect. The following are questions we have received via email regarding the Community Justice Transition Network RFP. Questions that were asked multiple times are only reflected below once. Questions that did not pertain to this RFP were omitted as not relevant. Some questions may have been edited for brevity. Questions have been organized and can be found as follows:

Question 1: We are having problems with submission of our responses to the CJTN RFP - EPIN 12827P0001.

1. Upload issues – we are not able to upload the main documents (only accepted document is resumes).
2. Disabled issues – we can't click "Validate"

Response: please set up a MOCS helpdesk ticket for any PASSPort related issues. MOCJ will extend the time until 5pm.

Question 2: We are trying to complete the proposal questionnaire for RFx BPM037361 - 12827P0001, Section VI, questions 2 & 3, but when we click the answer drop-down, the available options don't match the questions being asked. I wanted to flag this as quickly as possible since this RFX closes tomorrow at 2 PM. Please advise.

Response: We advise vendors to upload their answers to the Sections VI using the three optional document upload if you are experiencing a character limit issue and label their responses according to the associated question and section.

FOR ANY SECTIONS/QUESTIONS WHICH MAY HAVE TECHNICAL ISSUES AT THIS POINT, PLEASE UPLOAD AN ADDITIONAL DOCUMENT CLEARLY LABELING THE SECTION AND QUESTION THE RESPONSE IS ASSOCIATED TO USING THE 3 OPTIONAL DOCUMENT UPLOAD.



NEW YORK CITY MAYOR'S OFFICE OF CRIMINAL JUSTICE

COMMUNITY JUSTICE TRANSITION NETWORK RFP

Addendum #3 | EPIN 12827P0001

September 24, 2026

Any provisions of the above-referenced RFP that conflicts with the changes below, shall be modified to conform to such changes. This addendum hereby supersedes the solicitation issued on 08/18/2026 and Addendum #1 issued on September 16, 2026, Addendum #2 issued on September 21st, 2026. **The proposal deadline is September 30, 2026. The period for submitting questions has now closed as of end of business on September 16th, 2026.**

This is Addendum 3. There is a technical issue in sections II and IV which limit characters in short form. We advise vendors to upload their answers to the Sections II and IV using the three optional document upload if you are experiencing a character limit issue and label their responses according to the associated question and section.

The following are questions we have received via email regarding the Community Justice Transition Network RFP. Questions that were asked multiple times are only reflected below once. Questions that did not pertain to this RFP were omitted as not relevant. Some questions may have been edited for brevity. Questions have been organized and can be found as follows:

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Section 1. Eligibility & Competition Pools

1. Would dedicated leased office space within a professionally managed shared or flexible office facility satisfy the physical-location requirement for a Competition Pool? Additionally, must the proposed site be secured at the time of proposal submission, or may it be secured prior to the contract's start date?
Response: Yes, dedicated leased office space is sufficient if client service can be administered at the location safely and appropriately with the suitable level of privacy for service delivery. The location can be secured prior to the contract start date but given timing and the need for immediate service delivery, please identify the potential location and the extent of any conversations with property owner(s).
2. Are there geographic location requirements for subcontractors or specialized service partners when the subcontractor is not being used to establish the prime contractor's eligibility for a Competition Pool?
Response: Please see Addendum #1, Section 1, Question 7.
3. The RFP permits Citywide proposers to serve one or more special populations. Is there a maximum number of special populations that may be identified within a single Citywide proposal? Additionally, how will MOCJ and DOC identify and route referrals to Citywide providers serving designated special populations, and will enrollment, caseload, or performance expectations account for the size and service intensity of the population proposed?

Response: One special population may be identified within a single citywide proposal. MOCJ and DOC will use daily in custody lists along with emails and other communication to route individuals to citywide providers. Minimum service targets, caseload and performance expectations have been set for purposes of the RFP. MOCJ reserves the right to adjust service population targets depending on the needs of the criminal justice system.

4. What are the anticipated volumes of individuals per borough location, so that we can understand the geographical split.

Response: The table below shows the number of in community intakes less than 1 year and less than 2 years after release from January 2021-April 2026. Table shows selected-year numbers by borough. Totals sum across rows, not down columns. Proposers can anticipate the current volume to be reflective of the data below.

BOROUGH	In-community intakes $\leq$ 1 year after release	In-community intakes >1 year and $\leq$ 2 years after release
Staten Island	155	177
Queens	1055	1262
Outside of New York State	74	95
Bronx	1178	1508
Brooklyn	1197	1394
Manhattan	1150	1380

5. The way the new RFP describes the Citywide Competition Pool is such that contractors can only serve the special populations as described therein. Is this an accurate understanding?

Response: No, special populations are defined as a group of justice-involved/impacted persons having unique characteristics or needs for purposes of reentry. The list on Page 21 of the RFP is not exhaustive but indicative of qualified groups. Thus, you may propose to serve a group not listed.

Section 2. Program Service Delivery

1. What service duration or discharge standard applies to acute-rearrest participants?
Response: Please see Addendum #1, Section 2, Question 53.
2. May proposers' budget for supplemental space that is rented periodically for larger group programming, workshops, community events, or other program activities when the primary program site does not accommodate those activities.
Response: Yes, as long as all activities utilized at the supplemental space relate to the CJTN services.
3. When participants receive services through a subcontractor as part of the prime contractor program model, would those participants count toward the prime contractor's overall enrollment and performance targets? Are subcontractors expected to maintain separate enrollment or outcome targets?
Response: Yes, participants receiving services through a subcontractor would count towards the prime contractor's enrollment and performance targets. While subcontractors will not need to maintain enrollment or outcome targets in addition to the primes' target, they will be expected to maintain any enrollment or outcome targets set by the prime contractor. The subcontractors' data on enrollment and other required performance indicators would be reported by the prime to MOCJ.
4. The RFP indicates that Clinical Supervisors for in-custody Peer Support Specialists must be employed by the prime contractor, while behavioral health services may be delivered through subcontracted healthcare providers. Can MOCJ clarify whether the Clinical Supervisor must be a full-time employee of the prime contractor and whether there are specific licensure, credential, or minimum FTE requirements for this position?
Response: Clinical Supervisors must be a full-time employee of the prime contractor; however, there is no minimum FTE requirement specific to the program. Licensure or credentials include social work, psychology, marriage and family therapists, counseling. Typically, most of these positions are filled by social workers, but it could be a variety of licensed professionals filling the role.
5. Can you please confirm for me that any applicant proposing to serve as a prime contractor for services through this solicitation is responsible for all three components of reentry services outlined in the attached RFP?
Response: Yes, reentry services outlined in the RFP may be provided by the prime contractor, by a subcontractor, or partner provider as indicated in the RFP, but are ultimately the Prime's responsibility.
6. Can we use our own intake and assessment materials if awarded? If not, would we be able to amend the DOC's required intake and assessment forms?
Response: As of now, providers can use their own intake and assessment materials. However, this may change at the direction of MOCJ with advanced notice to providers.
7. The RFP says: "MOCJ envisions that Peer Support Specialists can be stationed at Rikers Island at least 4 days per week to offer weekly group and individual mentorship sessions, discharge planning, workshops and other programming to be determined based on the needs of individuals in DOC custody". Will MOCJ aid/coordinate with DOC for staff to be able to actually be able to carry out these activities out?

Response: MOCJ will coordinate with DOC to ensure in- custody activities are able to be implemented.

8. The RFP says: “If a provider is unable to bill Medicaid, MOCJ will provide support to consider options to expand clinical capacity through health care partnership or becoming a Medicaid provider.” If we subcontract for clinical services how does this apply?

Response: If the subcontractor does not bill Medicaid, MOCJ can support training and technical assistance for the provider in thinking through Medicaid billing options. If a provider subcontracts for behavioral health services with a provider licensed by the state, then that provider can bill to Medicaid as the first source of payment.

9. Can the target numbers and required presence on Rikers Island be adjusted to better align with programming needs specific to Staten Island. Given the relatively low population of persons in custody from Staten Island, maintaining a presence on Rikers four days per week from 9:00 a.m. to 5:00 p.m. may result in an overlap of services and underutilization of staff time. Our Persons in Custody (PIC) list typically averages around 60 individuals

Response: Minimum service targets and in custody requirements are set for purposes of the RFP. MOCJ reserves the right to adjust service population targets depending on the needs of the criminal justice system. MOCJ will work with awarded providers to ensure that deliverables are met, and service is not duplicated but delivered to the utmost quality.

10. It is noted on page 20 that MOCJ and DOC will identify people who are in the acute rearrest period for prioritization with the service provider. Is the service provider permitted to also engage in identification of individuals in the acute period, or is this population of participants intended to come solely through MOCJ/DOC identification?

Response: The acute rearrest period is a specific population that will be identified by MOCJ/DOC. If a provider identifies someone who might be in this category, we recommend they check with MOCJ/DOC to confirm. We appreciate providers’ willingness to support identification of people with complex needs.

11. Will MOCJ/DOC be providing participant identification services in either of the other components (in custody services or in community services), or is that solely limited to component C eligible participants?

Response: DOC will provide a daily in- custody list to awarded providers to support with identifying individuals for in-custody discharge planning services. Providers will be expected to identify participants in community, with exception of Component C individuals that are in an acute rearrest period.

12. In Addendum #1, answers to questions indicate that participants may only be counted in one of the three components. If a participant were to qualify for more than one component, is it up to service provider to select the component of their choosing? (For example, a participant who the service provider encounters as a walk-in in the community, but also happens to fall within the acute arrest period, thus being eligible for either component B or C.)

Response: Providers should select the appropriate component to the best of their ability. A participant may only count toward one component. In most circumstances, an individual in an acute arrest period will count as component C.

13. The RFP identifies clear minimum targets for annual participants. However, there is no mention of a maximum, other than noting the ideal participant to staff ratio. May a service provider set

its own operational maximum (either of at any given time over the service delivery year due to capacity, or a maximum for the year as a whole)?

Response: MOCJ will work with awarded providers to identify and monitor potential capacity limits.

14. Is the duration of services rendered to each individual participant intended to be open-ended and continue as long as the participant chooses to continue engagement? Is there any defined point of “completion” or is entirely up to the participant?

Response: Please see Addendum #1, Section 2, Question 50.

15. Other than reporting on overall service delivery to MOCJ, is there any entity to whom individual participants’ activities are to be reported?

Response: Providers are not required to report on individual participants’ activities to any other entity, however, aggregate level data may be shared in the following ways including but not limited to: local law reporting, City agency partnerships and/or other funding related requirements.

Section 3. Proposals & Submissions

1. Within the Manage Documents Section, it lists Budget Detail as a “required” document twice. Please clarify if we are to upload the budget Excel document two times. It also shows three documents – the budgets and CHAR500/990 as the only “required” documents. All others are listed as “optional.” We will upload all required documents as listed in the RFx.
Response: The budget only needs to be uploaded once. Please see Addendum #1, Section 3, Question 27 for full list of required documents.
2. In the table on page 4 (also attached) it lists as required “Letters of Reference,” but then it also immediately states: “Attach List Of At Least Three (3) Relevant References.” Are we required to attached just a list of references or actual reference letters?
Response: Please see Addendum #1, Section 3, Question 10
3. There is nothing I can see in the RFx that mentions M/WBE Requirements. However, in Passport, within the subcontractor and vendor section, there is a table labeled Prime Vendor MWBE Certification. Do we need to fill in this table? If so, I do not see an area where we can input or edit percentages.
Response: Although there are no specific M/WBE requirements at this stage, it is strongly encouraged to utilize MWBE certified providers as subcontractors where appropriate. If you have an M/WBE provider you would like to use, please make it known but it is not required to fill out the table.
4. Please confirm whether letters of intent are mandatory for every subcontractor, linkage, and local partner, given the conflicting language regarding required and optional documents.
Response: Please see Addendum #1, Section 3, Question 18.
5. Would it be possible to get the link to the recording as well as the FAQ, if there's one?
Response: The addendum #1 was released via PASSPort on 9/16/26. The recording has been posted to MOCJ’s website. It can be accessed using the following link:
<https://criminaljustice.cityofnewyork.us/solicitation/community-justice-transitional-network-rfp-2026>
6. Should proposers develop their annual funding request based on the specific staffing, enrollment, and service model proposed, up to the stated maximum? If an award amount is lower than the amount proposed, will MOCJ permit corresponding adjustments to staffing, scope, and enrollment targets prior to contract execution?
Response: Proposers should submit their best proposals at the best price possible consistent with Procurement Policy Board Rules. Yes, MOCJ reserves the right to adjust service population targets depending on the needs of the criminal justice system.
7. Beyond the minimum service levels identified for Components A and C, is there an anticipated overall annual enrollment range per contract that proposers should use when developing staffing and budget assumptions? Will final enrollment targets be based on the proposer's proposed service model and funding request, or established by MOCJ at award?
Response: Minimum targets are set for Components A, B and C. For budget and staffing purposes, proposers can assume the total enrollment target to be 750 served per year. Final enrollment targets will be established by MOCJ at award.
8. Please can MOCJ give details for the word limit for each response question.

Response: Please see Addendum #1, Section 3, Question 14

9. Please can MOCJ give an estimate timeline for when we should expect to receive answers to the RFP clarification questions?

Response: Addendum #1 answers were released via PASSPort on 9/16/26.

10. Do subaward organizations have to be on the MOCJ prequalified vender list or just the primary applicants?

Response: Subcontractors are not required to be on the prequalified vendor list; however, they must register to have an account for PIP and PASSPort to be submitted as a subcontractor in the system prior to fund disbursement at the start of the contract period. The proposer should also have an agreement with the potential subcontractor before submitting the application.



NEW YORK CITY MAYOR'S OFFICE OF CRIMINAL JUSTICE

COMMUNITY JUSTICE TRANSITION NETWORK RFP Addendum #1 | September 15, 2026 – EPIN 12827P0001

Any provisions of the above-referenced RFP that conflict with the changes below, shall be modified to conform to such changes. This addendum hereby supersedes the solicitation issued on 08/18/2026 and this Addendum #1 issued on September 15, 2026. **The proposal deadline is September 30, 2026.**

The following are questions received via email and the pre-proposal conference Teams chat regarding the Community Justice Transition Network RFP. Questions that were asked multiple times are answered once below. Questions that did not pertain to this RFP were omitted as not relevant. Some questions may have been edited for brevity. Questions have been organized and can be found as follows:

Section 1. Eligibility & Competition Pools	Pg. 1
Section 2. Program Service Delivery	Pg. 5
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Section 1. Eligibility & Competition Pools

1. May a borough-specific proposal focus on serving one of the special populations identified in the RFP, or may special-population proposals only be submitted through the citywide competition pool?
Response: Special-population proposals may only be submitted through the citywide competition pool.
2. For a citywide proposal, must the proposer maintain a physical program site or regular onsite service presence in each of the five boroughs, including Staten Island?
Response: Citywide proposers should maintain regular presence in the five boroughs or have physical program sites. Proposers may subcontract with organizations based in the borough or employ staff that are embedded in a local institution with which there is a formal partnership relationship.
3. Can a subcontractor participate across multiple Competition Pools (e.g., Brooklyn + Citywide Emerging Adults)?
Response: Yes, a subcontractor may participate across multiple competition pools.
4. Can one subcontractor appear in proposals submitted by multiple competing Primes?
Response: Yes, a subcontractor may appear in proposals submitted by multiple competing Primes.
5. For a citywide application for a specialized population, does the provider need to have either physical presence and/or a paid subcontractor in each borough, or could a combination of physical sites in some boroughs and unpaid linkage agreements in other boroughs be acceptable?

Response: Citywide proposers should maintain regular presence in the five boroughs or have physical program sites. Proposers may subcontract with organizations based in the borough or employ staff that are embedded in a local institution with which there is a formal partnership relationship.

6. For a citywide application, is a physical location required in all 5 boroughs, or would 4/5 be acceptable with accessible transportation options from the fifth borough?

Response: No, a physical location is not required in all 5 boroughs, however, citywide proposers should maintain regular presence in the five boroughs or have partnerships, linkage agreements or subcontracts. Proposers may subcontract with organizations based in the borough or employ staff that are embedded in a local institution with which there is a formal partnership relationship.

7. For borough-based applications, can subcontractors for specific services (such as transitional employment or behavioral health care) be based outside the borough, or must all providers be within the proposed borough?

Response: Subcontractors may be based outside the borough of service so long as the subcontractor program site is accessible by public transportation or other arrangements can be made by the Prime contractor.

8. For proposers serving a designated special population (particularly youth and emerging adults) will the minimum annual service targets be applied uniformly, or may those targets be adjusted given that we work with a specific subset of the population?

Response: The minimum targets will be applied uniformly. This is to establish a floor of service delivery capacity. Proposers may propose to serve more based on their service delivery model or the population to be served. MOCJ retains the right to adjust service population targets depending on the needs of the criminal justice system.

9. For the Citywide competition pool, can MOCJ please confirm that a proposer may identify and serve multiple Special Populations within a single Citywide proposal, rather than submitting a separate Citywide proposal for each population? Also, if a single Citywide proposal may address multiple Special Populations, does MOCJ anticipate prioritizing or otherwise favoring proposals that demonstrate the capacity to serve multiple Special Populations, as compared with proposals focused on a single Special Population? Or will proposals be evaluated based primarily on the strength and appropriateness of the proposed service model for the specific population(s) identified?

Response: Separate proposals must be submitted for each special population. Proposals will be evaluated based on the strength and appropriateness of the proposed service model.

10. Page 25 of the Community Justice Transitional Network specifies serving a minimum of 375 individuals in custody. Is that the minimum number served citywide, or is that per borough?

Response: 375 is the minimum number of people in custody to be served per proposal. Incarceration refers to services on Rikers island or in secured ACS detention (for those serving youth/emerging adults). 375 individuals are expected to be served in total, per year.

11. Regarding the special populations outlined in Section 3: Citywide Competition Pool, there appears to be potential overlap among eligible populations. For example, a young person may have gang involvement, receive SSI, and/or live with an intellectual, developmental, or physical disability. When an individual meets the criteria for multiple special population categories, how will MOCJ determine which provider is responsible for serving that individual? Will MOCJ

make referrals based on a primary identified need, provider specialization, participant choice, or another process?

Response: Providers will be expected to make referrals based on the needs of the individual.

12. If multiple providers are funded to serve different special populations through the Citywide Competition Pool, will participants be permitted to receive services from more than one provider when they meet eligibility criteria for multiple special populations?

Response: Yes. Participants may receive services from multiple providers, if they choose.

13. The RFP states that providers should have the ability to serve a minimum of 375 individuals in custody through Component A, 187 individuals in the community through Component B, and 188 individuals designated as being in an acute rearrest period through Component C. For organizations applying to the Citywide Special Populations pool, should providers assume the same annual service targets, or will MOCJ establish different enrollment and service expectations based on the specific population being served?

Response: The proposed targets are minimums. Different enrollment and service expectations may be established for citywide proposals, but they will not be less than the minimum targets stated.

14. If the minimum service expectations outlined for Components A, B, and C are not intended to apply to the Citywide Special Populations pool, does MOCJ anticipate a minimum annual enrollment or service target for proposals serving a specialized population? For example, would MOCJ consider a proposal to serve approximately 200 youth/emerging adults annually?

Response: The proposed targets are minimums. Different enrollment and service expectations may be established for citywide proposals, but they should not be less than the minimum targets stated.

15. Is the expectation that MOCJ will award 5 borough contracts (one per borough) each serving 750 individuals annually (3,750 total), and 3-10 citywide contracts for specialized populations to cumulatively serve the remaining 2,250 individuals (to meet MOCJ's goal of serving 6,000 total across 8-15 contracts)?

Response: MOCJ aims to create a robust, interconnected system of reentry services. Submissions will be evaluated and contracts awarded based on strength of the proposal and appropriateness of services, as well as the needs of the City. MOCJ intends to award at least five borough contracts and 3-10 citywide contracts for specialized populations.

16. Are only nonprofits eligible to bid or can for-profits apply as well?

Response: Any entities on the PQL (pre-qualified list) of vendors may apply.

17. Can a vendor be awarded more than 1 contract, i.e. 1) citywide for special population and 2) borough specific components A&B?

Response: Vendors may be awarded more than 1 contract.

18. Can a vendor submit a proposal for citywide special populations and a separate borough specific proposal for hybrid in-custody and in-community transition services?

Response: Yes, they may so long as they propose to serve all potential participants in the borough pool.

For example, a proposer submitting a citywide special populations proposal to serve only women

identifying individuals may also submitted a separate borough specific application, so long as there are no exclusionary criteria like gender.

19. Regarding Section 3: Citywide Competition Pool, the RFP states that organizations proposing to serve the Youth/Emerging Adult special population should aim to serve youth and emerging adults ages 13-20 in ACS Secure Detention and/or ages 18-24 in DOC custody. Would providers also be permitted or encouraged to serve youth in ACS Non-Secure Detention as part of this competition pool?

Response: No, this funding is contemplated for the secure settings listed only.

20. Will the RFP allow smaller or emerging organizations to participate as subcontractors, formal partners, or members of a provider consortium, particularly where they bring specialized services such as workforce training, behavioral health, mentoring, arts-based programming, entrepreneurship support, or culturally responsive community engagement?

Response: Yes. The RFP allows and encourages small or emerging organizations to participate as subcontractors, formal partners, or members of a consortium. Smaller organizations may also apply as a prime contractor.

21. Can small businesses participate as internship, transitional employment, apprenticeship, training-site, or permanent job placement partners under the CJTN model?

Response: Yes. Small businesses can participate as placement partners.

Section 2. Program Service Delivery

1. If we select to serve Manhattan as our Competition Pool, are we able to serve individuals from other boroughs if they prefer to receive services in Manhattan? Some participants may choose to travel to utilize services outside of their neighborhood of residence due to safety factors, other commitments in a different borough making travel to all one area easier, past relationships with a particular provider, or they may be unhoused and prefer a certain neighborhood in the City.
Response: Yes. Providers may serve individuals that prefer to receive services in your borough.
2. For the borough-based awards, if a participant wanted to receive services in a borough other than their home borough, would the provider need to turn them away/refer them to another provider?
Response: No. Providers would not need to turn participants away or refer them to another provider.
3. Is the purchase of a mobile van an allowable expense?
Response: Yes. A mobile van is an allowable expense.
4. Does "professional license in Cognitive Behavioral Therapy (CBT)" mean formal CBT-specific licensure, or licensed clinical staff trained/certified to deliver CBT-based interventions?
Response: Licensed clinical staff trained/certified to deliver CBT-based interventions is acceptable.
5. What data system will subcontractors be required to use, and at what frequency?
Response: This may be dictated by the Prime and should ensure compliance with program reporting windows indicated by the RFP.
6. Can one participant receive employment services from a specialized subcontractor while receiving case management/clinical services from the Prime or a different sub?
Response: Yes. Participants may receive services from the prime while also being served by its subcontractors.
7. How will "employment placement" and "retention" be formally defined for reporting purposes?
Response: Employment placement is defined as full-time or part-time permanent, unsubsidized employment. Retention is defined as maintaining permanent employment 30, 60, 90, & 180 days. Retention may be tracked up to 1 year.
8. Can social-enterprise-based transitional employment wages (e.g., Drive Change Foods) be charged directly to the contract?
Response: Yes, transitional employment of program participants may be charged directly to the contract.
9. What portion of participant stipends/transitional wages (e.g., paid Fellowship wages) is reimbursable?
Response: Participant stipends/transitional wages are fully reimbursable.
10. How will indirect costs be treated for subcontractors — can subs use their own approved NYC indirect rate?
Response: If you do not have a MOCS pre-approved indirect rate then you automatically default to a 10% de-minimums indirect rate.

11. What startup funding, if any, is available before service delivery begins?
Response: In FY27, advances will be launched once the contract is registered. The FY27 advance will total 30% of that fiscal year's new contract value. In FY28, MOCJ will be launching quarterly advances, starting from the beginning of the fiscal year.
12. Will Primes be expected to advance subcontractor costs while awaiting City reimbursement?
Response: MOCJ advances to the Prime Vendor. It is up to the discretion of the Prime if they wish to advance any funding to their sub-contractors.
13. How will performance-based/incentive payments flow through to subcontractors specifically?
Response: As Prime contractors invoice the City on the performance or incentive metric, payment will be disbursed to the Prime contractor for payment of the sub.
14. Is there a minimum subcontract dollar value?
Response: No, there is no minimum subcontract dollar value.
15. Is there a minimum or maximum percentage of a contract that may be subcontracted?
Response: No, there is no minimum or maximum percentage of a contract that may be subcontracted. However, prime contractors are expected to fulfill the prime contractor duties outlined in the solicitation.
16. Regarding Section 2, Component A: Hybrid In-Custody/In-Community Transition Services, please clarify the requirement that Peer Support Specialists be stationed at Rikers Island "at least 4 days per week." Does this represent an individual staffing requirement for each Peer Support Specialist, meaning each specialist must be stationed at Rikers Island at least four days per week? Or does it represent an overall program coverage requirement, which may be fulfilled by distributing the four days of Rikers Island coverage among multiple Peer Support Specialists who also have community-based responsibilities?
Response: This represents overall program coverage; however, consistency in staffing on Rikers is encouraged to support engagement pre and post release.
17. The RFP says that peer support specialists "can be stationed at Rikers Island at least 4 days per week" but also that they can do release day transportation, provide services to people post-release in their neighborhoods, and maintain connection with people transferred to DOCCS custody. Could you clarify if we could have peer support specialists have fewer days on the island in order to provide these services in the community? Or are you envisioning separate peer support specialists who work in the community who are distinct from the peer support specialists working on Rikers?
Response: Peer Support Specialists are required to be present on Rikers a minimum of 4 days per week. Providers are encouraged to have a consistent rotation of staff to ensure coverage.
18. In the list of required staffing, the RFP says, "Peer Supervisors and Clinical Supervisors for Peer Support Specialists." Are these separate roles? If so, could you please clarify the distinction between these two roles and the desired reporting structure?
Response: Peer Supervisors offer general/ day-to-day supervision. Clinical Supervisors are licensed clinicians that offer guidance and oversight. Peer Support Specialists should receive both general and clinical supervision to support in their work.

19. Please clarify the role of the Transition Coordinators in component A. Will they be making discharge plans, or will the Peer Support Specialists make the discharge plans?
Response: Transition Coordinators will support Peer Support Specialists with connecting with individuals pre and post release as well as making discharge plans.
20. For borough-based applications, how will the division of facilities/access work for the in-custody portion of the services. For instance, if a provider is assigned a certain number of dorms to provide services to, the individuals in those dorms are not necessarily returning to the borough that the provider is offering community services. Will there be a mechanism between providers to refer if someone is returning to a borough contracted to a different provider for continuity of care?
Response: DOC will assign facilities and units to each provider, based on need. Providers will be expected to offer a warm hand off to another provider located in the borough and individuals will return to.
21. The RFP indicates that the contractor should serve 188 people in the acute rearrest period. Is that in addition to the 187 people in the community and 375 people in custody (totaling 750 people minimum per year)?
Response: Yes. 188 people in an acute rearrest period are expected to be served in addition to the 187 people in community (non-acute rearrest) and 375 people in custody.
22. Can the 188 individuals designated as in an "acute rearrest period" overlap with the 375 in-custody or 187 in-community targets? (i.e., If an in-community client is also in their acute rearrest period, do they count toward both minimums?)
Response: The "acute rearrest period" service minimum target will not overlap with the 375 "in-custody" target.
23. If a client is served in-custody and successfully transitions to our in-community services, do they count as one unique individual for the life of the grant, or do they count toward both the 375 in-custody target and the 187 in-community target?
Response: If an individual is served in custody and in community, they will count as one unique individual for the life of the grant. They should be counted towards the in-custody target in order to track those coming from custody versus community.
24. The in-community (187) and acute rearrest (188) targets perfectly sum up to the in-custody target (375). Is it the City's expectation that 100% of our in-custody clients will engage in community services upon release, or can these targets be met via external community referrals and walk-ins? We are trying to understand the total number of clients we are expected to serve annually.
Response: All targets are individual and do not overlap. The 187 in-community target, includes external community referrals and walk-ins.
25. The RFP mentions "MOCJ intends to coordinate these networks through frequent communication with providers, as well as through the use of technology tool(s) for making referrals and tracking program participation." Will the mentioned technology tool be something MOCJ implements themselves similar to DOP and DYCD have their own portals to enter data? Is there already a proposed tool in mind or is this something we are to implement ourselves and coordinate between providers?
Response: MOCJ will provide the technology tool for usage for specific program operations, where applicable.

26. For the projected number of individuals to be served under each program component described on pages 25–28 of the RFP, should these counts be unduplicated across all components, or may a single individual be counted in more than one component if they participate in multiple services?
Response: Individuals to be served under each component will count as unduplicated across all components, even if individuals are engaged in multiple services.
27. Can the same person count in A, B, and C?
Response: Individuals to be served under each component will count as unduplicated across all components, even if individuals are engaged in multiple services.
28. Minimum volumes: May the same individual count toward Components A, B, and C, or are 375 + 187 + 188 intended as 750 unduplicated people annually per contract?
Response: Individuals to be served under each component will count as unduplicated across all components, even if individuals are engaged in multiple services.
29. May the same participant count toward Components A, B, and C, or do the required volumes represent 750 unduplicated participants annually?
Response: Individuals to be served under each component will count as unduplicated across all components, even if individuals are engaged in multiple services.
30. Acute-rearrest overlap: Are the 188 acute-rearrest participants expected to be a subset of the custody, community target, and what service duration or discharge standard applies?
Response: No. The 188 minimum for acute rearrest will be its own target. Proposers are expected to outline their engagement strategies and service delivery model for this population.
31. Are the 188 acute-rearrest participants expected to be a subset of the custody and community populations?
Response: No. The 188 acute rearrest target is not a subset of the in custody and in-community populations.
32. Clinical credentials: What does a “professional license in CBT or other behavior-modification curricula” mean, and which licenses/certifications satisfy the requirement?
Response: There is no specific type of CBT model required; the license or requirements is dependent on the provider’s proposed model.
33. How exactly is 30:1 calculated?
Response: All caseload carrying staff members’ caseloads are averaged together to determine the ratio. The expectation is the average would include people of higher and lower needs on the caseload of 30 people.
34. 30:1 ratio: Does "client to staff" apply separately to Transition Coordinators, peers, case managers, clinicians, or the aggregate direct-service team? Is it based on the active caseload or the annual people served?
Response: This depends on your staffing model, but should include any primary caseload carrying staff. Support staff should be excluded from the ratio. The ratio is an active caseload ratio. Typically, clinicians would have lower caseloads than peers, peers lower than transition coordinators due to expectations of jobs and the interactions with clients.

35. How is the 30:1 client-to-staff ratio calculated? Does it apply separately to each staff category or to the entire direct-service team, and is it based on active caseload or annual enrollment?
Response: Please see above response. Providers would be expected to share the projected ratios for each position.
36. Are there minimum or preferred caseload ratios for specialized populations?
Response: Providers are encouraged to aim for ratios below 30:1 for specialized populations, however, Providers should use propose the caseload ratios most appropriate to the populations they aim to serve.
37. Does MOCJ have minimum or preferred caseload ratios for Transition Coordinators, peer support specialists/Reentry Mentors, or clinical staff by assessed level of risk and need, including participants in an acute rearrest pattern, or should proposers establish and justify their own ratios?
Response: MOCJ has included a suggested overall caseload ratio of 30:1, however, providers should develop their caseload ratios based on appropriate staffing model(s). Typically, clinicians would have lower caseloads than peers, peers lower than transition coordinators due to expectations of jobs and the interactions with clients.
38. Which clinical licenses/credentials satisfy the wording?
Response: Social work, psychology, marriage and family therapists, counseling. Typically, most of these positions are filled by social workers, but it could be a variety of licensed professionals filling the role.
39. Which clinical licenses or certifications satisfy the requirement for a "professional license in CBT or other behavior-modification curricula"?
Response: Any licenses issued by a body that governs or administers curriculums or professional practices that authorize the use of CBT or behavior modification practices.
40. How is 4-day Rikers covered?
Response: Applicants will be expected to propose and outline what their 4-day coverage will look like.
41. Does the four-day-per-week Rikers Island coverage requirement apply to each contractor, each assigned facility, or the network overall? What assumptions should applicants use regarding shifts, clearances, space, and caseloads?
Response: 4 days per week on Rikers Island applies to each contractor. Applicant should assume that there should be coverage in facility 9am-5pm. Clearances are granted by DOC along with facility assignments/space. Caseload does not apply to in custody work, with exception of Peer Support Specialists engaged in pre-release mentorship.
42. Custody coverage: Does “at least 4 days per week” apply to each contractor, each assigned facility, or the overall network? What shifts, security clearances, space, and caseload assumptions should bidders use?
Response: 4 days per week on Rikers Island applies to each contractor. Applicant should assume that there should be coverage in facility 9am-5pm. Clearances are granted by DOC along with

facility assignments/space. Caseload does not apply to in custody work, with exception of Peer Support Specialists engaged in pre-release mentorship.

43. Will targets change with a smaller award?

Response: MOCJ reserves the right, prior to contract registration and during the term of the contract, to change the program service size, model, in custody service location, and/or adjust service population depending on the needs of the criminal justice system.

44. Will the required service targets be adjusted for organizations receiving smaller awards?

Response: 4 days per week on Rikers Island applies to each contractor. Applicant should assume that there should be coverage in facility 9am-5pm. Clearances are granted by DOC along with facility assignments/space. Caseload does not apply to in custody work, with exception of Peer Support Specialists engaged in mentorship.

45. Will the projected number of individuals to be served under each program component change with the number of bids awarded or are those numbers fixed?

Response: 4 days per week on Rikers Island applies to each contractor. Applicant should assume that there should be coverage in facility 9am-5pm. Clearances are granted by DOC along with facility assignments/space. Caseload does not apply to in custody work, with exception of Peer Support Specialists engaged in mentorship.

46. Please confirm whether an advance/startup percentage will be available to awardees.

Response: In FY27, advances will be launched once the contract is registered. The FY27 advance will total 30% of that fiscal year's new contract value. In FY28, MOCJ will be launching quarterly advances, starting from the beginning of the fiscal year.

47. Will awardees receive an advance or startup payment, and if so, what percentage and when will it be received?

Response: Yes. In FY27, advances will be launched once the contract is registered. The FY27 advance will total 30% of that fiscal year's new contract value. In FY28, MOCJ will be launching quarterly advances, starting from the beginning of the fiscal year. Awardees may receive quarterly advances of their contract at the start of the fiscal term (this is after the detailed budget has been set up and approved in PASSPort, MOCJ will then be able to launch advances in PASSPort).

48. Do targets include current participants?

Response: No. Targets do not include current participants.

49. May current participants be counted toward the required service targets?

Response: No. Targets do not include current participants.

50. What will MOCJ consider an individual to be "served," particularly within Components B and C? For example, under Component B, would an individual be considered served if they receive at least one behavioral health, supportive social, employment, or educational service, or is there an expectation that participants engage in multiple service categories and/or receive services for a minimum duration? Additional guidance on the minimum level of service participation required for an individual to be counted as served would help us develop appropriate service models, staffing structures, and participant targets.

Response: Individuals are considered “served” when they have received/completed the services indicated in their individualized service plan. Ideally, participants would engage in multiple service categories and maintain engagement for 1 year or more. For people in the acute rearrest period we expect there is a need for more intensive services likely including mental health and substance use and potentially the need for longer term engagement depending on the individualized service plan.

51. How do they measure success?

Response: Success is measured by a person’s stabilization in community, including but not limited to recidivism or rearrest, housing, family reunification, employment, education, prosocial relationships, access to health care, decreased mental health symptoms or substance use, decrease in number of crisis situations, community engagement, etc.

52. Are estimates available for how many acute arrest individuals may be identified / referred in each service area? Can we hear more about how MOCJ will refer the acute cases to each awarded site?

Response: 188 acute arrest participants are expected to be served per contract. Please refer to pages 25-28 of the RFP for minimum service targets. MOCJ and DOC will identify individuals in the acute arrest period and share the list with providers through email, DOC daily in custody list, or other determined method.

53. What service duration or discharge standard applies to acute-rearrest participants?

Response: For people in acute rearrest period the expectation is first contact with the individual within two days of release to mitigate the highest risk time. The first two weeks present higher risks for people in reentry and services should be frontloaded to engage the person in care. The service duration will depend on the person and meeting their individual goals. It is expected that providers use persistent engagement to ensure people are continuing to engage in care. If someone stops engaging in services, it is the expectation that provider follow up multiple times with the person to try to re-engage them or find out why they dropped out of the services.

54. Can you describe the relationship between the Transition Coordinators and Peer Support Specialists?

Response: Transition Coordinators support Peer Support Specialists with in-custody and in-community work. Transition Coordinators support by working with participants, processing referrals, discharge planning and case management. Peer Support Specialists are responsible for building healthy pro social relationships with individuals in custody and in community. Peer Support Specialists may be there at the time of discharge to support individuals upon release, attend reentry appointments in community, offer mentorship, and support Transition Coordinators with discharge planning.

55. Can you describe the differences between the role of Transition Coordinator and Peer Support Specialist?

Response: Transition Coordinators support by working with participants, processing referrals, discharge planning and case management. Peer Support Specialists are responsible for building healthy pro social relationships with individuals in custody and in community. Peer Support Specialists may be there at the time of discharge to support individuals upon release, attend reentry appointments in community, offer mentorship, and support Transition Coordinators with discharge planning in custody.

56. Is there a cap on the amount of referrals?

Response: No. There is no cap on the amount of referrals that can be made.

57. Will the RFP allow providers to propose non-traditional or specialized employment pathways such as barbering, security guard training, photography/videography, creative media, entrepreneurship, construction, peer work, or other certification-based career tracks?

Response: Yes. Providers are allowed to propose non-traditional and/or specialized employment pathways.

58. For trauma-informed services, will the RFP define required trauma-informed practices or curricula, or may applicants propose their own trauma-informed models, including psychoeducation, structured groups, arts-based healing, culturally responsive approaches, and wellness programming?

Response: The RFP gives examples of trauma informed curricula, but applicants may propose their own trauma-informed models. It is the expectation that trauma-informed training be provided to staff who work at the reentry service providers as a baseline; this training can also be accessed through the MOCJ-funded Justice Training Institute.

59. Will MOCJ require a specific number or percentage of Peer Mentors with lived experience in the criminal legal system, and will funding support peer mentor training, supervision, certification, and ongoing professional development?

Response: Ideally, all Peer Support Specialists/Mentors should have lived experience in the criminal legal system. Funding can be used to support further training, supervision, certification and their ongoing professional development. The NYC Justice Training Institute also can provide no cost training. The providers can have access to peer training and certification already available in the city in addition to their organization trainings.

60. Will funding allow for participant supports such as transportation, work clothing, uniforms, licensing fees, training materials, identification/vital document fees, meals during programming, technology access, or emergency stabilization needs that may support engagement and retention during the first 90 days post-release?

Response: Yes, transportation, work clothing, vital documents, meals during programming, etc. are allowable expenses.

61. For purposes of engagement, retention, active case management, and performance reporting, will MOCJ distinguish between an outreach attempt and a completed two-way participant interaction? May documented remote interactions, including secure messaging, confirmed reminders, digital check-ins, video/telephonic contacts, or other verified participant responses, count as meaningful engagement?

Response: Yes. MOCJ will distinguish between an outreach attempt and engagement. Outreach is an attempt by the provider to connect. Participation from the individual is required to count as engagement. A participant may engage with a provider through any of the methods mentioned.

62. Does MOCJ expect providers to establish a defined cadence for participant contact following release, particularly during the first 48 hours, first two weeks, or for participants in an acute rearrest period? May that contact cadence vary based on assessed need, engagement status, or service intensity?

Response: Yes, for people in reentry who are in the acute rearrest period the expectation is first contact or multiple attempted contacts within the first 48 hours, with additional services provided

in the first two week. Contact after the first two weeks would vary based on the individual's service plan but be expected to be intensive for this population.

63. May participants be enrolled in, consent to, or receive orientation to a participant-facing technology solution while still in DOC custody so that communication and transition-support workflows are active immediately upon release?

Response: Providers must be physically present four days a week to serve individuals.

Orientation can be done during this time. Video conferencing is possible, only when necessary, via NYC DOC technology platforms.

64. Where a proposal includes a pre-programmed or program-issued mobile device, may that device be provisioned before release, at the point of discharge, or only once the participant reaches a community provider site? Are there DOC security or operational restrictions proposers should account for?

Response: Mobile devices may be granted at discharge or in community at a provider site.

Devices may not be provisioned before release. DOC should be consulted for details on ALL approved and restricted items.

65. Do the RFP's neighborhood based and physical presence expectations apply to specialized technology subcontractors that do not provide direct neighborhood based human services, or may a prime use a non-local technology provider where participant facing and support services are delivered remotely?

Response: No, so long as the Prime or another subcontractor maintains the neighborhood presence required.

66. Will the MOCJ funded technology platform support API-based exchange, scheduled file transfer, CSV upload/download, or another method for exchanging data with prime and subcontractor systems? Which system will be considered the authoritative system of record for participant enrollment, referrals, service completion, and engagement?

Response: MOCJ will provide any technology tool for usage for specific program operations and related specifications, when and where applicable. MOCJ will work with Provider data teams to ensure programmatic reporting is completed timely and consistent across platforms.

67. What common participant identifier will be used across MOCJ, DOC, prime contractors, subcontractors, and the MOCJ funded technology platform to match records and prevent duplicate enrollment or reporting?

Response: New York State Identification (NYSID) Numbers and Date of Birth.

68. What participant information will MOCJ or DOC provide to an awarded provider at referral, and how far in advance of release should providers expect to receive that information for individuals approaching discharge?

Response: Providers will receive borough filtered list of people in custody daily for service delivery. Release dates may vary in length until discharge or may not be known based on the detention status of the person in custody.

69. Should participant facing technology subscriptions, program issued devices, cellular service, device replacement, mobile device management, implementation, integration, training, and technical support be budgeted as direct program costs, administrative costs, equipment, or another specific budget category?

Response: These expenses should be categorized into “Other Than Personnel Services” (OTPS) and then “Operations, Support, and Equipment” and listed by expense. Please see Attachment B Proposal Budget Summary which contains descriptions of all categories on the first sheet and sample budget structures on the following sheets by Fiscal Year.

70. Where MOCJ funded services include program issued mobile devices, may proposals budget for replacement devices, contingencies for damaged or lost devices, shipping, activation, and inventory management?

Response: Yes, it may be included.

71. Where identity verification is necessary for a remote participant interaction, may proposers use consent-based identity verification methods, including biometric verification where legally permissible?

Response: Yes, based on the express consent of the client.

72. Does MOCJ expect providers to establish a documented re-engagement workflow when a participant misses a planned contact, service appointment, referral connection, or other transition milestone? May technology generated notifications be used to prompt staff follow-up?

Response: Yes, this may be submitted, and technology may be implemented as a compliment to staff efforts.

73. For the required individual level monthly reporting, will MOCJ require reporting of individual outreach attempts, completed contacts, missed contacts, referral status, appointment attendance, and follow-up activity, or primarily aggregate service utilization and outcome data?

Response: Yes, MOCJ will require reporting on outreach, engagement, service utilization and outcomes.

Section 3. Proposals & Submissions

1. In Section 5.B.vii.a.1 of the Proposal Narrative requirements, under Component B: Comprehensive Services in the Community, proposers are asked to provide an annual target for “client enrollments in the reentry program.” Does this refer specifically to the number of participants enrolled in Component B comprehensive community services, or to total enrollments across the contractor’s overall CJTN program? Additionally, should the minimum 187 participants served under Component B and the minimum 188 participants served under Component C represent separate groups, or may the same participant be counted toward both minimum service targets?

Response: “Client enrollments in the reentry program” refers to Component B in community services. Component B and Component C targets represent separate groups and participants will not count toward both minimum targets.

2. We see that the RFP states that all applicants proposing to serve as a prime contractor for services through this solicitation are responsible for all three components of reentry services outlined in this RFP: (1) Hybrid In-Custody/In-Community Transition Services, (2) Comprehensive Services in the Community, and (3) Support for People in an Acute Rearrest Pattern. Since the last RFP that was issued for reentry services required that each component (Hybrid) and (Workforce) be submitted as separate proposals, we want to confirm that with this RFP, we are expected to submit a single proposal containing all 3 components. Can you please confirm this? Additionally, if we were to include individuals in an acute rearrest pattern within the services in Components 1 & 2, would this satisfy #3, or is there an expectation that we will carve out a distinct and separate program for individuals in an acute rearrest pattern?

Response: A single proposal should contain all 3 components (A, B, and C). It is expected that a distinct model will be carved out for individuals in an acute arrest period.

3. Are the only questions that need to be answered in PASSPort? The last RFP had an Attachment C that contained questions as well. We did not see an Attachment with questions, but want to make sure we have not missed anything. I also want to point out that in this RFP, the document entitled Attachment C, states Attachment E inside the document as the heading. We assume it is Attachment C but want to make sure.

Response: Yes, the only questions to be answered are in PASSPort. There is no attachment with additional questions. Attachment referenced in the question is Attachment C.

4. Can MOCJ confirm that the target categories identified in the RFP for Components A and B are the only target numbers applicants are expected to provide for those components?
 - a. Component A identifies proposed annual targets for: (1) clients served in DOC custody; (2) clients served in the community; and (3) clients matched with a peer navigator, life coach, or mentor in custody who will continue working with them in the community post-release.
 - b. Component B identifies proposed annual targets for: (1) client enrollments in the reentry program; (2) clients receiving CBT-based or other behavioral health services; and (3) clients receiving supportive social services, including the number receiving each type of service.

Response: No. There are additional targets related to employment, education and retention services. Please refer to page 27 of the RFP.

5. For Component C: Supporting People in Acute Rearrest Period, the RFP states that the Contractor should have the ability to serve a minimum of 188 individuals designated as being in

an acute rearrest period per fiscal year. It then asks the Contractor to identify its annual proposed target numbers and describe how it would engage participants around behavioral health needs, substance use disorders, housing insecurity, intensive case management, comorbid health conditions, and other specialized services. Unlike Components A and B, however, Component C does not appear to identify the specific categories for which annual proposed target numbers should be provided. Could MOCJ please clarify and confirm the specific categories for which applicants are expected to provide annual proposed target numbers under Component C? Specifically, should applicants provide targets for each service area identified in Component C (e.g., behavioral health, substance use disorders, housing insecurity, intensive case management, comorbid health conditions, outreach and engagement, peer support, behavioral health services, and coordination of services), or is the expectation limited to the overall number of individuals served in the acute rearrest designation?

Response: Please indicate the annual proposed target number of individuals served in an acute rearrest pattern. Targets for each service area do not need to be provided.

6. What does “Localized Service Provider(s)” mean under Component B of Attachment C?

Response: It is a reference to Pg 15 of the RFP that indicates providers should be accessible to neighborhoods listed.

7. What does “Connection to Long Term Care Supports” mean under Component B of Attachment C?

Response: People with mental illness or substance use disorders or other complex health care conditions typically need long-term recovery support services. Long-term care and support could mean access to housing, permanent supportive housing, health care or behavioral health services that would need to be ongoing.

8. We have a question regarding Attachment B and the budget requirements outlined on page 34 of the RFP. The RFP states that proposers should complete two tabs in the Proposal Budget Summary: (1) a full annualized budget for one contract year and (2) an itemized full budget for one contract year. However, Attachment B appears to differ from these instructions:

- a. Attachment B contains three tabs, rather than two.
- b. Each tab is labeled as a full annualized budget for FY27, FY28, and FY29, respectively, suggesting that a three-year budget is required.
- c. All three tabs appear to be budget summaries; we do not see a template for the itemized full budget referenced in the RFP.
- d. In PASSPort it states: Please submit proposed budgets for each of the city fiscal years 2027 (as of Jan 1, 2027), 2028, and 2029, using the template in Attachment B. This contradicts the instructions in the RFP.
- e. Could you please clarify whether proposers should complete the budget summaries for all three fiscal years and, if so, where/how the itemized full budget should be provided.

Response: Please fill out all tabs as described here as this addendum supersedes RFP instructions as to this topic. The first tab of the Excel file contains the budget item descriptions for classification purposes. The second tab is for FY27, please complete as of the projected start date of the contract (January 1st, 2027). The third tab is for all of FY28. The fourth tab is for all of FY29. Please add cells to Attachment B as needed to complete your itemized line-item budget.

9. Please clarify what must be uploaded into PASSPort?

Response: In PASSPort providers can upload these documents:

- a) Budget Detail
- b) CHAR 500 + 990 +Audit
- c) Corrective Action Plan
- d) Applicants also have the option to upload larger supplemental documents for each question in the RFP.

10. Are Letters of Reference required or only a list of references?

Response: A Letter of Reference should list three references with contact information and is required.

11. Can you please guide on requirement for recommendation letters and LOIs for application via MOCJ RFP?

Response: A Letter of Reference indicating three references with contact information and is required. A Letter of Intent is required from each organization with which the proposer seeks to enter into a subcontract, linkage agreement, or other agreement to offer services through this RFP.

12. With regards to Letters of Reference, do we have to upload the actual letters or a list of at least three (3) Relevant References? And if only a list what information exactly is needed for each reference listed?

Response: A Letter of Reference indicating three references with contact information is required.

13. May an organization that submits a proposal to be a prime contractor also be listed as a potential subcontractor on another organization's proposal?

Response: Yes, this is possible, but strong documentation practices are necessary to ensure there is no duplicate counting of individuals.

14. Is there a page, word, or character limit for the narrative portion of the application? Additionally, are there any formatting requirements, structural guidelines, or other specifications that applicants should be aware of when preparing their submission?

Response: There is no word count/ character limit for the narrative or formatting requirements. If you run into a limit while in PASSPort, you can attach supplemental documents with the remaining response.

15. Are there character or word limits for the narrative?

Response: There is no word count/ character limit for the narrative. If you run into a limit while in PASSPort, you can attach supplemental documents with the remaining response.

16. Are there word counts/limits for each of the responses?

Response: There is no word count/ character limit for each response. If you run into a limit while in PASSPort, you can attach supplemental documents with the remaining response.

17. Are all vendors selected from this RFP required to have all 3 components (Component A, B, and C) in their proposal? And for Component B - is the vendor required to deliver all 5 of the subcomponents? Or can we select from the 5 components?

Response: Yes, please address all 3 components in your proposal. Yes, vendor is required to deliver all subcomponents either through their own direct services or via partnerships, linkages,

or subcontracts.

18. Confirm LOIs are mandatory despite conflicting wording.

Response: Letters of Intent are mandatory. If the questions requires you to attach additional documents- then you can upload the file in the same section.

19. Required vs. optional LOIs: The required-document chart says LOIs are required, while a later instruction references an “Optional Documents” chart. Confirm that an LOI is mandatory for every subcontract, linkage, and local partnership.

Response: Letters of Intent are required.

20. Please confirm whether letters of intent are mandatory for every subcontractor, linkage, and local partner, given the conflicting language regarding required and optional documents.

Response: Letters of Intent are mandatory for all subcontractors, linkages and partnerships.

21. Can an organization be a sub-contractor for multiple vendors?

Response: Yes. However, subcontractors that work with multiple vendors should ensure their data tracking prevents any duplication of participants.

22. Are Letters of Intent only for Subcontractors or everyone?

Response: Letters of Intent are for any subcontractors, linkage agreements or partnerships.

23. Who are Linkage Agreements reserved for?

Response: Linkage agreements are for organizations engaging in a formal partnership, that will not be receiving funds from the prime contractor.

24. Are Linkage Agreements required with the submission of the proposal or is a letter of intent sufficient?

Response: Letters of intent are sufficient.

25. For Citywide Special Populations - are proposals also required to have all 3 components as outlined in Section 2?

Response: Yes. Proposals are required to have all 3 components as outlined in Section 2.

26. Is the required Completed Organizational Chart an org chart for the organization or for this particular program?

Response: The Completed Organizational Chart is for the organization.

27. Please clarify the required documents and where to upload them in PASSPort? The RFP specifies the following list below but in PASSPort the only required documents listed in the Manage Documents section is the Audit/CHAR500/990 and the budget (which is listed twice). Everything else is listed as Other under “optional”.

Response: Below is a list of the required documents. Proposers should upload documents in the "OVERVIEW" tab in PASSPort. Proposers must label and title each document for the section and question it corresponds to (ex: “Program Model and Services-Question 2”).

Required Documents:

- i. Budget Completed Proposal Budget Summary (Attachment B)
- ii. Provision of Services Form Completed Provision of Services by Prime Contractor and Partner Providers Form (Attachment C)

- iii. Organizational Chart
- iv. Letters of Reference: Attach List Of At Least Three (3) Relevant References --
 - v. Annual Financial Report Financial Audit Report or Certified Financial Statement explaining why no Financial Audit Report is currently available or required.
 - vi. Key Staff Resumes and/or Description of Qualifications for Key Staff Positions
- vii. Letters of Intent or equivalent are required from each organization with which the proposer seeks to enter into a subcontract, linkage, and/or local partnership agreement to offer services through this Solicitation.