

# WESTERN CAROLINA UNIVERSITY

## IMPORTANT BID ADDENDUM

*Date: 12/18/2024*

**FAILURE TO RETURN THIS BID ADDENDUM IN ACCORDANCE WITH INSTRUCTIONS MAY SUBJECT YOUR BID TO REJECTION ON THE AFFECTED ITEM(S).**

Bid Number: 73-RFP00724  
Addendum Number: 1  
Agent: Rick Hooper

Commodity: Telemental Health Services  
Opening Date/Time: 01/06/2025 @ 2:00 PM ET

### **INSTRUCTIONS:**

1. The following concerns the above referenced bid:

**Question:** Section 2.3 Notice to Vendors Regarding RFP Terms & Conditions: Is Western Carolina prepared to review proposed exceptions and negotiate mutually acceptable conditions with the chosen supplier post-award, and if so, is the preference to receive a separate exceptions document or for the vendor to redline directly in the RFP North Carolina General Terms & Conditions attachment?

**Answer:** Please redline in the terms document.

**Question:** Section 2.7: Proposal Contents. Is the preference that the RFP responses be inserted into the actual RFP Word document provided, or is there an opportunity to submit bid responses in a proposal document, highlighting sections/questions as well as our own cover page, table of contents etc.?

**Answer:** Submit responses in a proposal document highlighting the sections they are responses to. These can be uploaded as a single file.

**Question:** Section 7.0 Attachments, Attachment A: Cost Proposal. Is there interest in receiving a cost structure outside of the described hourly rate scope? For example, a per student per year cost (based on total enrollment) with uncapped hours/time duration vs the described monthly utilization? And, if so, what is the total student enrollment for Western Carolina in order to properly prepare a per student cost.

**Answer:** No.

**Question:** 5.2, pg. 12-13 How does WCU envision the referral process for the requested telemental health services? Would you want students to self sign-up without needing to be approved by CAPS, only direct referrals from CAPS, or both?

**Answer:** Students will be referred to the service after an initial appointment with the CAPS staff. There will be no option for students to self refer.

**Question:** 5.2, pg. 12-13 What limits, if any, does WCU place on how many sponsored sessions a student can receive per year? Will these limits differ for the contracted telemental health services?

**Answer:** There is no cap in services for students at WCU. However, we will be monitoring a student's use of the service to ensure that the resources are being allocated appropriately and used appropriately.

**Question:** 5.2, pg. 12-13 What is the overall utilization rate for WCU CAPS counseling services?

**Answer:** CAPS generally sees about 12% of students eligible for services.

**Question:** 5.2, pg. 12-13 What Electronic Health Record (EHR) system does WCU's CAPS use?

**Answer:** CAPS uses Titanium HER.

**Question:** 5.2, pg. 12-13 How/to what extent does WCU CAPS envision collaborating and/or coordinating care with the selected vendor?

**Answer:** CAPS expects to be able to communicate with providers providing teletherapy services. Additionally, we expect providers to communicate with CAPS when a student is experiencing an increase in risk-related symptoms.

**Question:** 5.2, pg. 12-13 Is WCU interested in contracting for psychiatry sessions to complement therapy for those who would benefit more from a combination of therapy and psychopharmacological treatment?

**Answer:** We are not interested in telepsychiatry appointments at this time. We already have this service available for students.

**Question:** 5.2, pg 12 What data will be collected and how often?

**Answer:** Data to be collected includes number of sessions attended, cancelled and not used.

**Question:** 5.2, pg 12 What University/state mandated trainings will clinicians be required to attend prior to access to students?

**Answer:** There are not mandated trainings by the university.

**Question:** 5.2, pg 12 How will the students will be referred?

**Answer:** Students will be referred after an initial meeting with CAPS.

**Question:** 5.2, pg 12 Is there a cap on the number of hours student can access?

**Answer:** Student use will be monitored so that students are using services appropriately. There may not be a cap to how many sessions a student has, but there may be some restrictions placed in terms of frequency of appointments.

**Question:** 5.2, pg 12 Are there University policies we are expected to implement?

**Answer:** No university policies to implement.

**Question:** 5.2, pg 12 Are services provided while students are on break and/or summer?

**Answer:** Services will be used similar to when services are open on campus. This does include summer and breaks.

**Question:** 5.2, pg 12 Are we required to bill student insurance?

**Answer:** No billing of student insurance.

**Question:** 5.2, pg 12 Will there be a liaison between the vendor and school counseling services?

**Answer:** There will be an assigned person from CAPS to work with vendor.

**Question:** 5.2, pg 12 How long are we required to maintain student records?

**Answer:** Awarded vendor will be required to keep clinical records according to licensure laws in jurisdiction where they are operating.

**Question:** 5.2, pg 12 What are the reporting requirements?

**Answer:** Reporting requirements are mandated by licensure laws in jurisdiction in which they practice.

**Question:** 5.2, pg 12 What hours are appointments scheduled?

**Answer:** Appointments scheduled according to provider's availability.

**Question:** 5.2, pg 12 Is the vendor required to provide after hour emergency/crisis calls?

**Answer:** Provider is not required to provide crisis services after hours.

**Question:** 5.2, pg 12 How often will vendor meet with WCU contract manager/team?

**Answer:** Vendor will meet with CAPS team to ensure service delivery is operative and functional but there is no required number of hours for this.

**Question:** 7.0, pg15 Are the quantity line items in the cost proposal separate services?

**Answer:** They are the same services just different quantities.

**Question:** 7.0, pg 15 Please explain the cost proposal breakdown. Need to clarify the number of hours you are asking to perform.

**Answer:** We wish to get a breakdown of the cost for different amounts of time used.

**Question:** 5.2, pg 12 What is the duration for this contract? Are there any optional years?

**Answer:** See section 1.1 for this bid.

**Question:** 5.2, pg 13 Can you define "clinical responsibility"?

**Answer:** Clinical responsibility means the provider is responsible for making decisions about the course of treatment for student. The provider assumes all liability for their services.

**Question:** After reviewing the proposal, I did not notice font, font size, margin, or spacing requirements. Are there specific requirements for the format of the proposal?

**Answer:** No specific requirements.

**Question:** Are electronic signatures accepted, or do all signatures need to be wet and scanned back into the document?

**Answer:** Electronic signatures are acceptable.

**Question:** Section 5.1, General, p. 12 What is the budget for this initiative?

**Answer:** No budget has been finalized at this time.

**Question:** Section 5.1, General, p. 12 Does a vendor currently provide telehealth services for Western Carolina University? If so, please provide the name of the current vendor, the current cost of services, and information on the current utilization of services.

**Answer:** We do not have a telehealth vendor that is providing these services at this time.

**Question:** Section 7.0, Attachment A: Cost Proposal, p.15 Attachment A: Cost Proposal. Please describe the amount requested in Total Cost. Is the University seeking a total cost reflective of an annual, monthly, or other rate for the services described? For example, with the description "Cost to provide up to 100 hours per month of clinical service as listed within

this bid," is the University seeking the annual rate for the described service (i.e., 100 hours X 12 months = 1,200 hours)?

**Answer:** We are looking for the monthly cost of services for up to 100 hours, 100-150 hours, 150-200 hours and 200+ hours of service by month.

**Question:** Section 7.0, Attachment A: Cost Proposal, p.15 Attachment A: Cost Proposal. Does the University anticipate any seasonal utilization trends such that utilization in certain months might be markedly different from utilization in other months? If so, please describe this seasonality.

**Answer:** We do not anticipate seasonal adjustments.

**Question:** What is the anticipated student demand for telemental health services on a monthly basis (e.g., average number of counseling hours or sessions)?

**Answer:** This RFP is for the provision of 24 hours of clinical service weekly.

**Question:** Are there specific technical requirements for integrating the vendor's platform with WCU's existing systems (e.g., student portals or health records)?

**Answer:** There are no technical requirements for integrating, as the service provider will keep their own records.

**Question:** What specific analytics and usage data does WCU require, and how frequently should reports be provided?

**Answer:** We will ask vendor to provide data regarding number of sessions used and number cancelled by each student referred.

**Question:** How does WCU intend to structure the payment model (e.g., hourly rate, per-session fee, subscription-based pricing)?

**Answer:** We intend for the structure to be a per session fee.

**Question:** How does WCU envision the collaboration between the vendor's services and WCU's CAPS staff (e.g., referrals, shared notes)?

**Answer:** We anticipate the need for providers at CAPS to consult with vendor's providers and for vendor's providers to let CAPS know when student is experiencing symptoms of increased risk.

2. Check ONLY one of the following categories and return one properly executed copy of this addendum prior to bid opening time and date.

- ☐ Bid has already been mailed. Changes resulting from this addendum are as follows:
- ☐ Bid has already been mailed. **NO CHANGES** resulted from this addendum.
- ☐ Bid has **NOT** been mailed and **ANY CHANGES** resulting from this addendum are included in our bid.

Execute Addendum:

BIDDER: \_\_\_\_\_

ADDRESS (CITY & STATE): \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME and TITLE: \_\_\_\_\_

BID NO. \_\_\_\_\_  
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