



**Request For Proposal
for
County of La Crosse, Wisconsin**

Friday, September 5, 2025

HUMAN SERVICES DEPARTMENT
Western Region Integrated Care (WRIC)
A La Crosse, Jackson & Monroe County collaboration

**WRIC Comprehensive Community Services (CCS) -
Psychotherapy and Substance Abuse Treatment**

Proposals must be received no later than
3:00 p.m., October 3, 2025

SPECIAL INSTRUCTIONS:

- 1. Proposals should be submitted electronically**
Proposals should be submitted via email with *proposal title in subject line* of the email.
Proposal Title: **WRIC CCS – Psychotherapy & Substance Abuse Treatment RFP**
- 2. Vendor Conference will be held via Microsoft Teams online and/or phone on September 24**
RSVP will be required to attend – See Section 1.5
- 3. Deliver on or before October 3, 2025, by 3:00 p.m. to:**
Email pmedinger@lacrossecounty.org

Final decision anticipated by October 24, 2025, with a contract start date of January 1, 2026.

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1.0 GENERAL INFORMATION

1.1 Introduction and Background

The purpose of this document is to provide interested parties with information to enable them to submit a proposal to provide **Psychotherapy and Substance Abuse Treatment** to the Western Region Integrated Care (WRIC). These services will be a part of a regional contract, working with La Crosse, Jackson and Monroe County WRIC consumers. La Crosse County also contracts separately for sporadic Community Resource Specialist services at the ISDE rate set by this RFP.

As a result of this Request For Proposal (RFP) Process, the WRIC Consortium will establish a qualified provider network, along with setting one individual rate and one group rate for each service descriptions above. These rates will encompass direct care, travel, and service planning and will be the same for each service for all degree levels and geographical areas within the region. Given the nature of shared credentialing requirements, the psychotherapy rate from this RFP will also be used to determine the **family psychoeducation, therapist provider** level (Therapeutic Psychoeducation) for qualifying providers under that service array. The service description and requirements for family psychoeducation are included in the 2024 RFP for Skill and Wellness Services.

WRIC will award contracts to all qualified providers that are able to provide the full or partial array of services as requested and described in this document at the rates set by this process. It is anticipated that the provider network will continue to grow, and all new qualified providers interested in providing these services in the future will be offered the rates set by this solicitation process.

Providers should submit one proposal indicating which services below they are interested in providing:

- Psychotherapy
- Substance Abuse Treatment

It is the intention of La Crosse County Human Services (LCHS) to use this process to set rates for a network of qualified providers. Providers are able to indicate that they will provide one or both of these services, along with geographical limits they may have. Interested providers should submit one individual rate for each service, along with the other requested information. All provider rates submitted during this process will be used to set one individual rate per service by averaging all rates submitted for that service. A group rate Psychotherapy and Substance Abuse Treatment will be set by dividing the final individual rate for that service by three (3) in accordance with Medicaid guidelines.

1.1.2 Service Description

A. Target Population

Youth and adults that have a diagnosis of mental health and/or substance use provided by a Medical Doctor or Psychiatrist and be found to be functionally and

clinically eligible for CCS.

Individuals that need more than outpatient level of care; need additional wraparound, community support to live and function at their full potential

Individuals *at* risk of out-of-home/residential placement as a result of one or more of the following behaviors, or returning from out-of-home placement where one or more of these behaviors was the focus of treatment:

- Aggressive/violent behavior;
- Substance use concerns that impact 2 or more life domains;
- Mental health concerns that impact 2 or more life domains;
- Individuals in family situations that have impaired structure and family boundaries.

B. Eligibility

All CCS referrals will be generated from client need and will be done by WRIC. Once referral is made, provider agency shall notify the WRIC facilitator within 7 days of referral status and plan for start of services.

C. Description of Type of Services to be Rendered

Psychotherapy

Includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.

Psychotherapy may be provided in an individual or group setting.

For CCS members, outpatient psychotherapy must be provided through the CCS program if needed by the member and cannot be reimbursed separately under any other Medicaid or BadgerCare Plus benefit per Wis. Admin. Code § [DHS 107.13\(7\)](#).

CCS provides services to individuals who are determined to require more than outpatient counseling services. CCS consumers must clinically require services beyond psychotherapy to be eligible for CCS services
[Wisconsin Legislature: DHS 36.13](#)

For continuity of care, preference will be given to vendors who accept Medicaid or other means to continue to provide services outside of CCS funding.

CCS programs can provide psychotherapy in the following three ways. All associated elements listed must occur.

1. The CCS program can contract an individual/sole proprietor licensed/certified mental health professional to provide psychotherapy.
 - The staff member must meet the qualifications as identified under Allowable Provider Types for the Psychotherapy Service Category. All providers are required to be licensed/certified and acting within their scope of practice.
 - Providers described in DHS 36.10(2)(g)1-10, 14,22, Wis. Admin. Code [Wisconsin Legislature: Chapter DHS 36](#)
 - The staff member must be included on the CCS staff roster and work in the CCS program to provide psychotherapy directly to CCS individuals.
 - The CCS program must ensure that the staff member follows all [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) rules.
2. The CCS program can contract with a certified [Wis. Admin. Code ch. DHS 35\(opens external link\)](#) outpatient mental health clinic to provide psychotherapy to CCS participants, herein after referred to as a “DHS 35 certified clinic:”
 - The staff member must meet the qualifications as identified under Allowable Provider Types for the Psychotherapy Service Category. All providers are required to be licensed/certified and acting within their scope of practice
 - Providers described in DHS 36.10(2)(g)1-10, 14,22, Wis. Admin. Code [Wisconsin Legislature: Chapter DHS 36](#).
 - The staff member's time must be split rostered in both the DHS 35 certified clinic and CCS program.
 - The DHS 35 certified clinic must roster their staff to reflect the amount of time the staff provides psychotherapy within the certified DHS 35 clinic only. The DHS 35 certified clinic does not need to roster the amount of time their staff provides psychotherapy to CCS participants.
 - The CCS program must roster the DHS 35 certified clinic staff to reflect the amount of time the staff provides psychotherapy to CCS participants only.

- The DHS 35 certified clinic must share with the CCS program the required [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) service documentation that will be filed in the CCS file. CCS participants served by the DHS 35 certified clinic do not need to have a duplicate DHS 35 file.
- 3. The CCS program can contract with a certified [Wis. Admin. Code § DHS 75.50\(opens external link\)](#) outpatient integrated behavioral health treatment service to provide psychotherapy to CCS individuals, herein after referred to as a “DHS 75.50 certified program:”
 - The staff member must meet the qualifications as identified under Allowable Provider Types for the Psychotherapy Service Category. All providers are required to be licensed/certified and acting within their scope of practice.
 - Providers described in DHS 36.10(2)(g)1-10, 14,22, Wis. Admin. Code [Wisconsin Legislature: Chapter DHS 36.](#)
 - The staff member's time must be split rostered in both the DHS 75.50 certified program and CCS program.
 - The DHS 75.50 certified program must roster their staff to reflect the amount of time the staff provides psychotherapy within the certified DHS 75.50 program only. The DHS 75.50 certified program does not need to roster the amount of time their staff provides psychotherapy to CCS participants.
 - The CCS program must roster the DHS 75.50 certified program staff to reflect the amount of time the staff provides psychotherapy to CCS participants only.
 - The CCS program must ensure that the contracted DHS 75.50 certified program follows all [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) rules.
 - The DHS 75.50 certified program must share with the CCS program the required [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) service documentation that will be filed in the CCS file. CCS participants served by the DHS 75.50 certified program do not need to have a duplicate DHS 75.50 file.

Substance Abuse Treatment

Substance abuse treatment services include day treatment (DHS 75.12, Wis. Admin..Code) and outpatient substance abuse treatment services can be in an individual or group setting.

The other categories in the service array also include psychosocial rehabilitation substance abuse services that support members in their recovery.

The CCS program does not cover Operating While Intoxicated assessments, urine analysis and drug screening, detoxification services, medically managed inpatient treatment services, or narcotic treatment services (opioid treatment programs). Some of these services may be covered under Medicaid and Badger Care Plus outside the CCS program.

For continuity of care, preference will be given to vendors who accept Medicaid or other means to continue to provide services outside of CCS funding.

Option 1

The CCS program can hire or contract a licensed/certified substance use professional to provide substance use treatment services.

- The staff member must meet the qualifications as identified under Allowable Provider Types for the Substance Abuse Treatment Service Category. All providers are required to be licensed/certified and acting within their scope of practice.
 - Providers described in DHS 36.10(2)(g), 1, 2 (with knowledge of addiction treatment), 4 (with knowledge of psychopharmacology and addiction treatment) 16, Wis. Admin. Code.
 - Substance abuse professionals include:
 - Certified Substance Abuse Counselor.
 - Substance Abuse Counselor.
 - Substance Abuse Counselor in Training.
 - Marriage & Family Therapy, Professional Counseling & Social Worker Examining Board (MPSW) 1.09 specialty.
 - All providers are required to be licensed/certified and acting within their scope of practice.
- The staff member must be included on the CCS staff roster and work in the CCS program to provide substance use treatment directly to CCS individuals.
- The CCS program must ensure that the staff member follows all [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) rules.

Option 2

The CCS program can contract with the following levels of care certified under [Wis. Admin. Code ch. DHS 75\(opens external link\)](#) to provide substance use treatment to CCS participants, herein after referred to as a “DHS 75 certified program:”

- [Wis. Admin. Code § DHS 75.49\(opens external link\)](#) - Outpatient substance use treatment service
- [Wis. Admin. Code § DHS 75.50\(opens external link\)](#) - Outpatient integrated behavioral health treatment service
- [Wis. Admin. Code § DHS 75.51\(opens external link\)](#) - Intensive outpatient treatment service
- [Wis. Admin. Code § DHS 75.52\(opens external link\)](#) - Day treatment or partial hospitalization treatment service
- [Wis. Admin. Code § DHS 75.53\(opens external link\)](#) - Transitional residential treatment service
- [Wis. Admin. Code § DHS 75.54\(opens external link\)](#) - Medically monitored residential treatment service

The staff member must meet the qualifications as identified under Allowable Provider Types for the Substance Abuse Treatment Service Category. All providers are required to be licensed/certified and acting within their scope of practice.

- Providers described in DHS 36.10(2)(g), 1, 2 (with knowledge of addiction treatment), 4 (with knowledge of psychopharmacology and addiction treatment) 16, Wis. Admin. Code.
 - Substance abuse professionals include:
 - Certified Substance Abuse Counselor.
 - Substance Abuse Counselor.
 - Substance Abuse Counselor in Training.
 - Marriage & Family Therapy, Professional Counseling & Social Worker Examining Board (MPSW) 1.09 specialty.
 - All providers are required to be licensed/certified and acting within their scope of practice.

The staff member’s time must be split rostered in both the DHS 75 certified program and CCS program.

- The DHS 75 certified program must roster their staff to reflect the amount of time the staff provides substance use treatment within the DHS 75 certified program only. The DHS 75 certified program does not need to

roster the amount of time their staff provides substance use treatment to CCS participants.

- The CCS program must roster the DHS 75 certified program staff to reflect the amount of time the staff provides substance use treatment to CCS participants only.

The CCS program must ensure that the contracted DHS 75 certified program staff follows all [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) rules.

The DHS 75 certified program must share with the CCS program the required [Wis. Admin. Code ch. DHS 36\(opens external link\)](#) service documentation that will be filed in the CCS file. CCS participants served by the DHS 75 certified program do not need to have a duplicate DHS 75 file.

Individual Therapy (non-CCS Funded) – La Crosse County

There are times when other sections of LCHS need to purchase psychotherapy services. These services are sometimes sought sporadically or ongoing by our Child Protective Services and Youth Justice Units. These services are generally only individual services and paid at just a face-to-face rate. Most often these services take place in the homes of consumers or in the community, but also sometimes happen in office and/or telehealth. All direct and indirect costs should be included in this quarter hour face-to-face rate.

1.1.3 Program Expectations

D. Vendor Agency and Performing Providers

- Performing providers must be legitimate and qualified providers who are practicing within the scope of their credentials and training. All providers must be fully credentialed with WRIC prior to rendering services.
- WRIC credentialing refers to the collection and verification of a provider's qualification including:
 - signed provider agreements
 - CCS training logs (rehabilitation worker and/or orientation)
 - completed DOJ and Caregiver background check within the last four years,
 - signed BID within the last four years
 - two professional references,
 - professional licensure (if applicable)
 - educational degree and/or transcript
- Vendor agency must submit an up-to-date W9 using either a EIN or Social Security Number, appropriate insurance based on services provided (see 4.1), DHS certifications when necessary, and meet all DHS audit requirements (see 4.3)

WRIC – CCS Psychotherapy and Substance Abuse Treatment – provider network

- Credentialed WRIC Providers must maintain their active credential status which includes:
 - Submitting an annual continuing education training log of eight hours; two of those eight hours must include a training in ethics and boundaries.
 - Performing providers described in [DHS 36.10\(2\)\(g\)9-22](#); Submit clinical supervision logs documenting one hour of clinical supervision for every 30 hours billed to the WRIC CCS Program. These hours shall be submitted on a regular basis at the discretion of WRIC.
 - Performing providers described in [36.10\(2\)\(g\)1-8](#); Submit clinical peer consultation logs documenting one hour of clinical peer consultation for every 120 hours billed to the WRIC CCS Program. These hours shall be submitted on a regular basis at the discretion of WRIC.
 - Submit updated licensure or certificates as it relates to provider services.
 - Submit updated BID form once every four years or at the request of WRIC.
 - Submit updated DOJ and caregiver background check once every four years or at the request of WRIC.
- Performing providers described in [DHS 36.10\(2\)\(g\)9-22](#) shall receive, from a staff member or contracted provider qualified under DHS [36.10\(2\)\(g\)1-8](#), day-to-day supervision and consultation and at least one hour of supervision per week or one hour for every 30 direct service hours. A supervision agreement shall be signed by the clinical supervisor acknowledging their agreement to supervise WRIC CCS performing providers named on this agreement and clearly indicate the date this agreement will start and end, how frequently supervision will be provided to staff and in what formats (in-person, virtual, individual and/or group)
- Performing providers will collaborate with the wraparound team of the client by attending team meetings or informing the service facilitator of client progress prior to team meeting if unable to attend.
- Performing providers must communicate with WRIC through in-person meetings, emails and/or phone calls to discuss any issues with claim submissions, progress notes, provider credentialing, submission of documents or any other matters pertaining to the WRIC program and service delivery.
- Vendor agency must maintain communication and collaboration with WRIC by scheduling and attending regular connection meetings. These meetings can occur in-person or virtually at the convenience of all parties. The connection meetings will cover topics regarding claim submission, Quality Assurance, contracting, insurance and auditing requirements, service delivery and programs, referrals and general updates between WRIC and the vendor agency to promote positive relationships.

WRIC – CCS Psychotherapy and Substance Abuse Treatment – provider network

- Vendor Agency will notify Quality Assurance when there are changes to any WRIC CCS credentialed providers such as termination, resignation, hiring, degree change, changes on a BID or background check.
- Vendor agency must attend the La Crosse County Vendor Conferences scheduled three times each year. If unable to attend, vendor agency must notify WRIC and make time to watch the conference recordings. It is expected that any information shared at the vendor conference is the responsibility of the vendor agency to obtain and share with their performing providers.

E. Submission of Claims and Documentation

- Documentation is required for all services provided and billed. The vendor must provide documentation that is complete in accordance with standard practices and uses the client's service plan as guidance. Services completed and documentation of the services must lead back to the objectives and interventions outlined in client's service plan.
- Documentation must be in accordance with the law and standard practices. Provider must document how services meet the goals and objective of the client, what services were provided by the provider, and an evaluation of the client's response to the services as it relates to their goal and objectives.
- Vendor agency and their performing providers must use the La Crosse County Invoice template when submitting claims for payment. The template must not be altered or changed in any way except to input the billing information.
- Claims for payment must be submitted within 60 days from the last day of the service month as a clean claim. Vendor agency and their performing providers must submit a progress note for each date of service on the invoice. Clean claim is defined as a claim that requires no corrections.
- Vendor agency and their performing providers must document service time using quarter hour increments as units for submission of claims and progress notes. Each service date must clearly indicate the number of units billed for service delivery or service planning, documentation, and travel time. On the invoice the units for service delivery or service planning and documentation should be combined and rounded to the nearest unit.
- Invoice must include client legal name, date of service, service description, service units, contracted rate, amount billed, performing provider legal name, and credentialed degree level of provider.

F. Services and Delivery

- Services must be provided for the facilitation of recovery and meet the goals and objectives indicated on the individualized service plan of the client.

- Performing providers must provide psychosocial rehabilitation services. Psychosocial rehabilitation services are defined as services and supportive activities that assist a client with mental health and/or substance abuse conditions to achieve their highest possible level of independent functioning, stability, and independence and to facilitate recovery. These services must be tailored to address the specific mental health and/or substance abuse treatment needs of the client.
- Performing providers must routinely evaluate the client's response to the psychosocial rehabilitation services, documenting change, progress, and suggesting modifications, as appropriate to the interdisciplinary wraparound treatment and recovery team. If progress toward goal and objective is not met in a timely manner, the wraparound team shall determine service need and alter, remove and/or replace with another service that is clinically appropriate to better meet the client's needs.
- Mental Health Professionals and Substance Abuse Professionals retain decisional authority regarding service plan and services provided.
- Services must be provided in a location that will meet the client's clinical needs based on the individualized service plan. The location of the service will not impede the client's ability to engage in services and will facilitate the recovery of the client by promoting community integration and independence.
- Services may be offered on a 1:1 basis or within a group of no more than 10 clients. Group services must follow a curriculum or program guide that clearly defines the following and must be available to WRIC upon request:
 - Title and purpose of the group
 - Targeted client audience
 - Expected outcomes of the group
 - Timeline of the group including details about open/closed sessions, expected start and end date of group, frequency of sessions and duration of session
 - Overview of each group session or how each session is structured
 - Provider: Client ratio
- Services provided using telehealth must be as effective as services offered in-person. The client may choose to decline services via telehealth and request in-person only services.

1.2 Purchasing and Contracting Division/Department

This Request For Proposal process is administered by La Crosse County, Purchasing Division and the person responsible for managing the procurement process is Chris Sander.

The contract resulting from this RFP will be administered by La Crosse County, Human Services Department. The Contract Coordinator will be Chris Sander.

1.3 Definitions

The following definitions are used throughout the RFP:

CCS – Comprehensive Community Services

LCHS – La Crosse County Human Services

WRIC – Western Region Integrated Care

RFP – provider network – Means the solicitation package is released to assist in establishing a network of providers that are qualified to provide the service at the rates set by the solicitation process. Client choice and vendor capacity will be considered when making referrals for services.

Wraparound Team – must include at least the client and/or guardian indicated on the individualized service plan, service facilitator and/or mental health professional. Additionally, the team may also include any service providers, family members, friends, community supports, or other informal supports identified by the client and/or guardian.

1.4 Clarifications and/or Revisions to the Specifications and Requirements

Any questions concerning this RFP must be received in writing by e-mail **on or before September 19, 2025**. Email is preferred. Send inquiries to:

Paul Medinger
Contract Unit Supervisor
E-Mail: pmedinger@lacrossecounty.org
Phone: (608) 785-5520

Providers are expected to raise any questions, exceptions, or additions they have concerning the RFP document at this point in the process. If a provider discovers any significant ambiguity, error, conflict, discrepancy, omission, or other deficiency in this RFP, the provider should immediately notify the above named individual of such error and request modification or clarification of the RFP document.

In the event that it becomes necessary to provide additional clarifying data or information, or to revise any part of this RFP, revisions/amendments and/or supplements will be provided via the La Crosse County Website and via email to all known interested parties.

1.5 Vendor Conference

A vendor conference will be held at **1 p.m. on Wednesday, September 24, 2025**, via Microsoft Teams online and/or phone. This is held to respond to written questions and to provide additional instruction and information to providers on the submission of proposals. There will be minutes taken, posted on the website and emailed to all known interested parties. ***This will be the only forum where questions will be answered.***

To receive the information on how to attend the vendor conference, please **RSVP** via email Paul Medinger at pmedinger@lacrossecounty.org by **noon., Tuesday, September 23, 2025**. Paul will forward you the link and phone information via email prior to the vendor conference.

1.6 Reasonable Accommodations

La Crosse County will provide reasonable accommodations for the vendor conference upon request. If you need accommodations at the vendor conference, contact Chris Sander at (608) 785-5520 or pmedinger@lacrossecounty.org. Email preferred.

1.7 Calendar of Events

September 5, 2025 Release date of Request For Proposal
September 19, 2025 Questions on RFP due to County
September 24, 2025 Vendor Conference, **1 p.m. – RSVP required**
October 3, 2025 Proposals due from providers, **receipt by 3:00 p.m.**
October 24, 2025 Anticipated notification of rates sent to providers
January 1, 2026 Estimated contract start date

1.8 Contract Terms and Rate Increases

The contract shall be effective from **January 1, 2026 until December 31, 2028**.

Annual rate adjustments will be made automatically following the June Consumer Price Index for Urban Regions (CPI-U).

1. The rate will be determined from tables from the U.S. Department of Labor- Bureau of Labor Statistics for the Midwest Urban region for areas of 50,000 or more.
2. Should the CPI-U ever be less than 0%, the Provider rates will stay the same as the current year. Should the CPI-U ever be more than 3%, Provider rates will go up 3%.

PREPARING AND SUBMITTING A PROPOSAL

1.9 General Instructions

The evaluation and selection of providers and the contracts will be based on the information submitted in the provider's proposals. Failure to respond to each of the requirements in the RFP may deem the proposer non-responsive.

1.10 Public View of Proposals

To the extent permitted by law, it is the intention of La Crosse County to withhold the contents of the proposal from public view until such times as competitive or bargaining reasons no longer require non-disclosure, in the opinion of La Crosse County. At that time, all proposals will be available for review in accordance with the Wisconsin Public Records Law.

1.11 Incurring Costs

La Crosse County is not liable for any cost incurred by proposers in replying to this RFP.

1.12 Submitting the Proposal

Proposers must submit all materials required for acceptance of their proposal via email by **3:00 p.m., October 3, 2025** to:

Paul Medinger

pmedinger@lacrossecounty.org

If proposer is unable to submit materials via email, please contact Paul Medinger at (608)785-5520 or pmedinger@lacrossecounty.org for further instructions. Email is preferred. All proposals must be received by time and date stated above.

1.13 Proposal Organization and Format

Proposals should include the following forms:

- ***Vendor Services Outline***

Completion of this form outlines the services your agency is interested in providing.

- ***Budget Request Form***

Please set one quarter hour rate for individual services. This form must be completed for your rate to be considered as a part of this process.

Vendor will need to bill CCS funded services by breaking out service delivery, documentation, service planning, and travel time. The minutes of the Direct Service and Documentation should be added together and rounded to the nearest unit (i.e. quarter hour increment).

2.0 PROPOSAL SELECTION AND AWARD PROCESS

2.1 Opening of Bid

Proposals will be opened after 3:00 p.m. on October 3, 2025.

2.2 Preliminary Evaluation

The proposals will be reviewed to determine if requirements are met. Failure to meet requirements may result in the proposal being rejected. In the event that all providers do not meet one or more of the requirements, La Crosse County reserves the right to continue the process with proposals that most closely meet the requirements specified in this RFP.

2.3 Right to Reject Proposals

La Crosse County reserves the right to reject any and all proposals.

In addition, La Crosse County reserves the right to discontinue the RFP process at any time and makes no commitments, implied or otherwise, that this process will result in a business transaction with one or more providers.

2.4 Proposal Review

Proposals will be reviewed by an evaluation committee. By submitting a proposal, you are agreeing that you will meet all necessary requirements for the services indicated. An individual rate will be set for the network of providers by averaging all rates submitted. A group rate Psychotherapy and Substance Abuse Treatment will be set by dividing the final individual rate by three (3).

2.5 Required Forms

The following forms must be completed and submitted. Blank forms are attached.

A. Vendor Services Outline

B. Budget Request Form

2.6 Final Offers

The final rates will be set and communicated to all interested providers by October 24, 2025. At that time, all responding, and currently contracted providers will be asked if they are interested in contracting for those rates for 2026. Once interest is confirmed by a provider, contracts will be processed.

3.0 SPECIAL CONTRACT TERMS AND CONDITIONS

La Crosse County reserves the right to accept or reject any or all proposals or portions thereof without stated cause.

La Crosse County reserves the right to re-issue any solicitations.

Upon final review, La Crosse County by its proper officials, employees, or agents shall attempt to negotiate and reach a final agreement with all qualified providers. If La Crosse County, for any reason, is unable to reach a final agreement with any provider; La Crosse County reserves the right to reject such provider.

Clarification of proposals: La Crosse County reserves the right to obtain clarification of any point in a provider's proposal or obtain additional information.

La Crosse County reserves the right to waive any formalities, defects, or irregularities in any proposal, response, and/or submittal where the acceptance, rejection, or waiving of such is in the best interests of La Crosse County.

La Crosse County reserves the right to disqualify any proposal, before or after opening, upon evidence of collusion, intent to defraud, or any other illegal practice on the part of the provider.

Indemnification

The Provider agrees to the fullest extent permitted by law, to indemnify, defend and hold harmless, the Purchaser, and its agents, officers and employees, from and against all loss or expense including costs and attorney fees by reason of liability for damages including suits at law or in equity, caused by any wrongful, intentional, or negligent act or omission of the Provider, or its (their) agents and / or subcontractors which may arise out of or connected with activities covered by this contract.

4.0 EXPENSES RELATED TO CONTRACTING

4.1 Insurance Requirements

Provider will at all times, during the terms of this contract, keep in force insurance policies issued by an insurance company authorized to do business and licensed in the

State of Wisconsin. Unless otherwise specified in Wisconsin Statutes, the types of insurance coverage and minimum amounts shall be as follows:

- Workers' Compensation: minimum amount statutory
- Comprehensive general liability: \$1,000,000 per occurrence and in aggregate for bodily injury and property damage
- Auto Liability (if applicable): \$1,000,000 per occurrence and in aggregate for bodily injury and property damage
- Professional Liability (if applicable): minimum amount \$500,000
- Excess Liability Coverage: \$1,000,000 over the General Liability and Automobile Liability coverages.

4.2 Interpreters

Providers of services, not goods, are required by contract to sign a Letter of Assurance for Civil Rights Compliance and/or fill out a full Civil Rights Compliance Plan. Both of these documents require a provider of services to provide those services without discrimination, which means that they will need to provide an interpreter/translator at no cost to the client or La Crosse County.

4.3 Background Checks

- A. Provider shall comply with the provisions of DHS 12, Wis. Admin Code.
- B. Provider shall conduct background checks at its own expense of all employees assigned to do work, with direct client contact, for the Purchaser under this contract.
- C. Provider shall conduct background checks with other states where the employee has lived, any time an employee required to have a background check, has lived out of state within the last 3 years.
- D. Provider shall retain in its Personnel Files all pertinent information, to include a Background Information Disclosure Form and/or search results from the Department of Justice, the Department of Health Services, and the Department of Regulation and Licensing as well as out of State records, tribal court proceedings and military records.
- E. Provider shall not assign any individual to conduct work under this contract who does not meet with requirement of this law.
- F. Provider shall train its staff to immediately report all allegations of misconduct to their immediate supervisor, including abuse and neglect of a client or misappropriation of client's property. Staff shall also report to their immediate supervisor, as soon as possible, but no later than the next working day, when they have been convicted of any crime or have been, or are being investigated by any government agency for any act or offense (DHS 12.07(1)).
- G. The Provider shall notify the Purchaser, as soon as possible, but no later than the Purchaser's next business day, when any of the following occurs with regard to its personnel pursuant to DHS 12.07(2):
 - a. The Person has been convicted of any crime

- b. The person has been or is being investigated by any governmental agency for any other act, offense or omission, including an investigation related to the abuse or neglect, or threat of abuse or neglect, to a child or other client, or an investigation related to misappropriation of a client's property.
 - c. The person has a governmental finding substantiated against them of abuse or neglect of a client or of misappropriation of a client's property.
 - d. In the case of a position for which the person must be credentialed by the department of regulation and licensing, the person has been denied a license, or the person's license has been restricted or otherwise limited.
- H. Upon notification from Provider, Purchaser will follow its internal procedures.
- I. Provider shall maintain the results of background checks on its own premises for at least the duration of the contract. Provider shall complete the form attached as Appendix 7 (Page 2) and return it to the Purchaser. Purchaser may audit Provider Personnel files to assure compliance with the State of Wisconsin Caregiver Background Check Policy.
- J. After the initial background check at the time of employment, licensure or contracting, the Provider must conduct a new Caregiver Background Check every four (4) years, or at any time within that period if the Provider has reason to believe a new check should be obtained.

Plan and budget accordingly for all of these expenses related to contracting with La Crosse County.