SUBJECT: Request for Proposals (RFP) for Community Needs Assessment **RFP 2027-001**, Scheduled to Open**: November 13, 2026**; Date of Issue: **September 30, 2026**

FROM: Adam Velez
Sr. Director, Compliance and Systems Support

DATE: November 2, 2026

THIS NOTICE SHALL SERVE AS ADDENDUM NO. II - TO THE ABOVE REFERENCED REQUEST FOR PROPOSALS

CHANGE: RFP 2027-001 is hereby amended to read: "Revised 11/2/2026".

RFP 2027-001, Section 004 – Scope of Services, II. Community Needs Assessment is hereby amended to read: "CHCS follows both the T-CCBHC Criteria provided by Texas HHSC and the National CCBHC Criteria provided by SAMHSA."

RFP 2027-001, Section 004 – Scope of Services, Population of Focus & Methodology is hereby amended to read: "Input should be collected with participant's consent collected and documented."

RFP 2027-001, Section 004 – Scope of Services, Population of Focus & Methodology is hereby amended to read: "Asynchronous Telephone Survey as defined as spoken or recorded phone questions with or without a live surveyor; and".

RFP 2027-001, Section 004 – Scope of Services, Population of Focus & Methodology is hereby amended to read: "Proposals should include a plan for conducting secret shopper visits/contacts, and a justification for how this plan meets the goals outlined in the RFP. English and Spanish will be the languages utilized (including sign language) for testing. The Center will provide the selected sites."

RFP 2027-001, Section 004 – Scope of Services, Population of Focus & Methodology is hereby amended to read: "b. The sample size of feedback will be sourced by the awarded vendor independently. Proposal should include a justification for the sample size, and steps taken to ensure statistical significance. c. The awarded vendor will collaborate with Center staff to schedule appropriate audiences for each group and determine total counts for each category. Only English and Spanish languages will be required."

RFP 2027-001, Section 004 – Scope of Services, Other Deliverables is hereby amended to read: "A completed CNA available in English and Spanish languages provided electronically and in printed format. The printed format should include ten (10) printed copies, five (5) copies printed in English and five (5) copies printed in Spanish."

RFP 2027-001, Section 012 – Award of Contract and Reservation of Rights, paragraph no. 10, is hereby

amended to read: “The successful RESPONDENT must be able to formally invoice the CENTER for services rendered. The CENTER will pay invoices within thirty (30) days of receipt only after services have been performed and approved by the CENTER. The CENTER is a tax-exempt entity.”

RFP 2027-001, Section 014 – Insurance Requirements, paragraph no. 7, is hereby amended to read: “Name the CENTER, its Board of Trustees, employees, and volunteers as additional insured by endorsement, as respects operations and activities of, or on behalf of, the named insured performed under contract with the CENTER, with the exception of the workers’ compensation policies;”.

RFP 2027-001, Section 015 – RFP Attachments, RFP Attachment B, Price Schedule, is hereby amended to read: “The proposal should include all fees to provide services listed in this RFP. Include a project budget (financial proposal), including a budget narrative that details each line-item expense, including hourly rates by position with a not to exceed total.”

QUESTIONS SUBMITTED IN ACCORDANCE WITH RFP SECTION 010 – RESTRICTIONS ON COMMUNICATION

1. CHCS issued a Community Needs Assessment RFP in 2023 (RFP-2024-002). Which organization prepared the resulting assessment, and is that organization eligible to respond to this RFP? Will CHCS share the prior CNA report, its survey instruments, and its underlying datasets with the selected contractor so that findings can be compared over time?

   Response: Crescendo Consulting Group, LLC completed the previous assessment and is eligible to respond to this RFP. A copy of the current Community Needs Assessment (CNA) and preliminary datasets may be provided to the awarded vendor.

2. What is the budget or not-to-exceed amount for this contract, and what was the contract value of the assessment completed under RFP-2024-002? Does the budget need to cover participant incentives, translation, venue costs, and printing of the final report?

   Response: The anticipated budget has not yet been established and yes, the budget should include all fees to provide services listed within the Request for Proposals; the awarded amount for RFP 2024-002 was $85,000.

3. Section 011 awards 5 points to a business with a headquarters or office located within Bexar County. What does CHCS require to qualify as an office for this purpose (for example, a leased location, a staffed project office, or an office opened after award), and are respondents based outside Bexar County otherwise evaluated on an equal basis?

   Response: Respondents are required to maintain a headquarters or physical office in Bexar County, Texas to receive the five (5) local business points. This office should have a direct role in performing work under the resulting contract.

4. Section 012 states that invoices will be issued on a time and material basis. Would CHCS accept a firm fixed price for each deliverable or project phase, invoiced on completion of that deliverable? If time and material invoicing is required, should Attachment B present hourly rates by position with a not-to-exceed total?

Response: The Center will accept a firm fixed price invoiced upon completion of project phase/deliverable. Please refer to the RFP revised 11/2/2026.

5. How should pass-through costs such as participant incentives, focus group venues and refreshments, interpretation and translation, and printing be presented in Attachment B? How many printed copies of the final CNA are required in English and in Spanish, and will CHCS provide meeting space at its facilities for focus groups and interviews?

   Response: Please refer to the RFP revised 11/2/2026. Responses should include a budget inclusive of all fees to provide services listed within the Request for Proposals. The Center cannot guarantee meeting spaces at its facilities for any work to be completed under the resulting contract.

6. Section 004 requires participant feedback that meets the minimum number needed for statistical significance. Does CHCS have target confidence levels, margins of error, or minimum completed surveys for the service area survey and for people receiving CHCS services? For the asynchronous telephone survey, will CHCS provide client contact lists, or should the contractor source a sample independently?

   Response: Please refer to the RFP revised 11/2/2026.

7. Section 004 sets a minimum of two Spanish-language focus groups for community members and two for people receiving CHCS services, but no total counts. What minimum number of focus groups and one-to-one interviews does CHCS expect in each category, will CHCS recruit and schedule the client, peer provider, and leadership sessions, and are any languages other than English and Spanish required for surveys or focus groups?

   Response: Please refer to the RFP revised 11/2/2026.

8. For the secret shopper survey, how many contacts or visits are expected at each of the minimum two outpatient clinic sites and the Intake Line, which languages and communication services (including sign language) should be tested, and will CHCS select the sites?

   Response: Please refer to the RFP revised 11/2/2026.

9. Does CHCS require review by an institutional review board or an internal research committee for the surveys, focus groups, and interviews, particularly those involving people receiving CHCS services? If so, will CHCS's own review process apply, and will the contractor need to sign a data use or business associate agreement to receive client-level or administrative data?

   Response: Please refer to the RFP revised 11/2/2026.

10. What CHCS administrative data will be provided to the contractor (for example, client demographics, service utilization, wait times, and clinic locations), and in what format?

    Response: Readily available internal data may be provided in appropriate formats in collaboration with the awarded vendor.

11. For the CCBHC Compliance/Alignment Matrix (Other Deliverables, item 17) and the certification research in Section 004, II.C, which version of the CCBHC certification criteria should be used (for example, the 2023

SAMHSA criteria, Texas HHSC certification standards, or both), and is the CNA timed to a specific recertification or reporting date?

Response: Please refer to the RFP revised 11/2/2026.

12. What are the anticipated Board of Trustees approval date and contract start date, and is there a required completion date for the final CNA within the 8 to 10 month period?

    Response: The Center anticipates making a recommendation to be presented to the Board of Trustees in February 2027 with a projected contract execution date of March 1, 2027. Please note, this is subject to change.

13. The RFP lists all deadlines in Central Standard Time, while San Antonio will be on Central Daylight Time on October 8, 16, and 30. Please confirm that 12:00 PM Central Daylight Time (local San Antonio time) is the controlling deadline for questions and for proposal delivery on October 30, 2026?

    Response: Please refer to RFP Section 009 – Submission of Proposal.

14. Section 009 requires names to match Texas Secretary of State and Comptroller records, and Attachment A, Part One asks for the 11-digit Texas Comptroller Taxpayer Number if applicable. For a corporation organized outside Texas, must Texas registration and a Comptroller Taxpayer Number be in place at proposal submission, or before contract execution?

    Response: Texas registration and Comptroller Taxpayer Number must be in place before contract execution with the awarded vendor.

15. Section 014 lists no professional liability requirement, although the additional insured provision refers to a professional liability policy. Is professional liability coverage required for this contract, and if so, at what limits? May the proof of insurability included with the proposal be a current certificate that does not yet name CHCS as additional insured?

    Response: Please refer to the RFP revised 11/2/2026.

16. Could you confirm whether a prime respondent may assign a bounded research and data subcontract to a specialist firm, for example public-source secondary research, structured dataset development, source validation, evidence registers and research QA, while the prime retains responsibility for community engagement, interviews/focus groups, GIS, health-domain analysis, recommendations and the final CNA?

    Response: Please refer to RFP Section 008 – Proposal Requirements.

17. Is there a budget ceiling?

    Response: Please refer to the response to question No. 2.

18. Is there an incumbent?

    Response: Please refer to the response to question No. 1.

19. Do all focus groups and interviews need to be conducted face to face, or can a mix of in person and face-to-face be used?

    Response: Please refer to the response to question No. 5.

20. Does the survey need to be administered as an asynchronous telephone survey, online survey, and paper survey, or could one or two of the three methods be employed?

    Response: Please refer to the response to question No. 6.

21. Regarding the intended target audience, should we consider service users or other groups as well?

    Response: Please refer to the response to question No. 7.

22. What kinds of data related to service use, assessment, and outcomes will be available for the assessment?

    Response: Please refer to the response to question No. 10.

23. Would it be possible to request utilization data related to hospitalizations?

    Response: Please refer to the response to question No. 10.

24. Is it acceptable to offer financial incentives for community members who are participating in study data collection outside of their professional role (e.g., service users and families)

    Response: Please refer to the response to question No. 5.

25. Should the bidder budget for translation and interpretation services for surveys, interviews, and focus groups?

    Response: Please refer to the response to question No. 5.

26. Budget and contract structure: What is the anticipated budget range? Will the award be fixed price, time and materials with a not-to-exceed ceiling, or uncapped time and materials? Please clarify how the all-inclusive project budget should align with the stated time-and-materials invoicing requirement.

    Response: Please refer to the response to question No. 2.

27. Survey and platform costs: Must printed-survey expenses—including printing, distribution, postage, return postage, and data entry—and digital survey expenses—including platform licensing, hosting, and accessibility—be included in the contractor's proposed budget? Will CHCS provide any of these resources or fund them separately?

    Response: Please refer to the response to question No. 5.

28. Minimum participation counts: What minimum counts are required for completed survey responses, interviews, focus groups, and participants per group? Are there required response rates, confidence levels, margins of error, or targets by population, language, or geography, or should respondents propose and justify these?

    Response: Please refer to the response to question No. 6.

29. Telephone surveys: Please clarify the intended meaning of “asynchronous telephone survey,” including whether automated surveys, interviewer-led calls, or another approach is expected.

    Response: Please refer to the RFP revised 11/2/2026.

30. Recruitment support: Will CHCS provide approved participant contact lists, recruitment assistance, survey distribution through its communication channels, meeting space, and scheduling support? Which recruitment responsibilities must the contractor independently manage?

    Response: Please refer to the response to question No. 6 and question No. 10.

31. Participant incentives: Are incentives permitted for survey, interview, and focus-group participants? If so, what restrictions apply, and must incentive costs fall within the contract budget, or will CHCS fund them separately?

    Response: Please refer to the response to question No. 5 and question No. 7.

32. IRB oversight and consent: Will CHCS require Institutional Review Board review or a formal determination that IRB oversight is unnecessary? If required, who will coordinate and fund the process? Will CHCS provide consent procedures, including requirements for minors and participants needing additional protections?

    Response: Please refer to the response to question No. 9.

33. Prior assessment and contract: Please provide the most recent completed Community Needs Assessment, including available appendices, survey instruments, methodology, and participation counts. Please identify the prior contractor, any named subcontractors or local teaming partners, and the total awarded contract value, including amendments.

    Response: Please refer to the response to question No. 1 and question No. 10.

34. Administrative data and agreements: Will CHCS provide deidentified administrative data? If so, which datasets, in what formats, and on what schedule? Under what data-use agreement, business associate agreement, or other agreement will access occur, and what security, retention, and destruction requirements apply?

    Response: Please refer to the response to question No. 9 and question No. 10.

35. Local-business points: Must the prime respondent maintain a headquarters or office within Bexar County to receive the five Local Business points, or may a named subcontractor or joint-venture member satisfy this criterion? What documentation and office-establishment date are required?

    Response: Please refer to the response to question No. 3.

36. Texas registration: Must an out-of-state respondent be registered or authorized to conduct business in Texas at proposal submission, or only before contract award or execution? Please clarify any Texas Secretary of State, Comptroller taxpayer-number, and tax-status documentation required at each stage.

    Response: Please refer to the response to question No. 14.

37. Language and accessibility: Beyond the specified Spanish-language focus groups and bilingual final assessment, which survey instruments, interviews, presentations, and other materials must be available in Spanish or

additional languages? Will CHCS provide translation or interpretation support, or must the contractor include all associated costs?

Response: Please refer to the response to question No. 5 and question No. 7.

38. Secret-shopper activities: How many encounters are expected at each required outpatient clinic and the intake line? Will CHCS provide approved scenarios and protocols, including procedures to prevent interference with actual patient access or emergency services?

    Response: Please refer to the response to question No. 8.

39. Final reports and technology deliverables: How many printed copies of the final assessment are required in each language? Must the contractor also provide editable source files, underlying datasets, GIS files, or interactive dashboards? If dashboards are required, who will fund ongoing licenses and hosting?

    Response: Please refer to the response to question No. 5.

40. Meetings and presentations: How many project meetings, stakeholder presentations, and review sessions should respondents budget for, and at what frequency? Which require in-person attendance, at what locations, and which may be conducted virtually? Should all associated travel expenses be included in the proposed budget?

    Response: Please refer to RFP Section 004 – Scope of Services.

41. Schedule and approvals: What is the anticipated contract start date? What interim milestones, CHCS review periods, and revision rounds should respondents include within the 8–10-month assessment schedule?

    Response: Please refer to the response to question No. 12 and RFP Attachment A, Part Three. The Center will work with the awarded vendor to finalize this timeline.

42. Publication of answers: When does CHCS anticipate publishing written responses and any addenda? Will the October 8 pre-submittal conference materials, attendance list, and written questions and answers also be made available?

    Response: Once a thorough review of all questions submitted is completed, the Center will post all questions submitted including the Center's responses, and any revisions to the RFP to the Center's website.

43. Will CHCS accept a team in which the prime leads methodology, regulatory alignment and the final report, while a partner provides GIS and data analytics?

    Response: Please refer to RFP Section 010 – Restrictions on Communication.

44. Should the assessment follow a specific framework, such as CCBHC needs-assessment requirements or HHSC guidance?

    Response: Please refer to the response to question No. 11.

45. Will CHCS provide existing utilization and demographic data, or should proposers budget for all primary data collection?

    Response: Please refer to the response to question No. 10.

46. Is there a budget range or not-to-exceed amount?

    Response: Please refer to the response to question No. 2.

47. What are the anticipated project start and end dates?

    Response: Please refer to the response to question No. 12.

48. Who will serve as the executive committee and day-to-day project manager for the CNA?

    Response: The awarded vendor will be notified of the responsible parties at contract execution.

49. Will a steering committee or advisory group review project milestones and draft findings? If so, has it already been formed, or will the selected consultant be responsible for forming it?

    Response: Please refer to the response to question No. 48.

50. Are there any deliverables or milestones related to strategic planning, budget development, or accreditation requirements that must be included in our proposed timeline but are not specified in the RFP?

    Response: Proposals will be evaluated on the extent to which the proposal meets the RFP requirements and the Center's needs.

51. Is there an anticipated budget range or a not-to-exceed amount for this project? Are participant incentives permitted for surveys, interviews, or focus groups? If so, should these costs be included in the budget? May food and refreshments for focus groups be included in the budget?

    Response: Please refer to the response to question No. 2.

52. Are resident survey participants limited to adults aged 18 and older?

    Response: Please refer to the response to question No. 11 and question No. 28.

53. Would seeking participation from current clients who are parents of minors, or with participants under age 18, require IRB review?

    Response: Please refer to the response to question No. 9.

All other RFP conditions remain unchanged.
RFP documents may be downloaded from http://www.chcsbc.org/contracting-opportunities/