



COUNTY OF SONOMA

Frequently Asked Questions

Request for Applications (RFA) for Adult Mental Health Treatment Services

DHS No. 25-048

Question 1: Does high-intensity outpatient level include IOP and/or PHP?

Answer 1: No, IOP and/or PHP would fall under the Day Treatment levels.

Question 2: Will this slide deck be provided after the call?

Answer 2: Yes – it is posted on the DHS website at: <https://sonomacounty.gov/health-and-human-services/health-services/divisions/administration/contracts-and-board-item-development-unit>

Question 3: Can you please provide the link to where the docs can be found?

Answer 3: <https://sonomacounty.gov/health-and-human-services/health-services/divisions/administration/contracts-and-board-item-development-unit>

Question 4: Can you confirm which attachment is the RFA? Is it Attachment A?

Answer 4: The RFA is the totality of items on the website. At that site, it is divided into a section for Forms and a section for Attachments, and there is a separate link to the scoring criteria and evaluation process. The RFA is comprised of all those items in totality. The specific application form is Form 1. Attachment A contains all the details of what services we are seeking.

Question 5: May bidders answer questions in a separate word document rather than entering text directly into the provided text boxes so that font size is legible?

Is it acceptable to expand the fields on the form so that the responses are in a font size that is legible?

Answer 5: The fields on the form do not expand, so it is acceptable to say “see attached” and provide a text document with your expanded answers.

Question 6: Can you talk a little bit more about what services/referrals look like for the category where they are embedded at housing locations?

Answer 6: Typically, the provider indicates the location that they operate, and their capacity to provide on-site supportive services there. Contract negotiation includes identifying how many spots at that location would be for County clients that this contract would cover. The referrals go through our weekly referral meeting where we track referral information. This meeting includes all the adult team managers from Sonoma County Behavioral Health programs to make referrals and trouble-shoot care-coordination issues.

For a new program, this meeting is an opportunity to provide education about your program to the referring programs, specifically what the referral requirements are for that location and the mechanism for receiving referrals.

Additionally, the County has a policy¹ and procedure on how transfers and referrals are managed and which covers the formal referral initiation, acceptance of the referral, the clinical consult conversation between the case manager and the receiving provider, the formal enrollment, etc. That specific process would be structured out within your contract in the referral section.

The referral meeting meets weekly on Mondays.

Question 7: Is this RFA appropriate for application for Peer Support Services?

Answer 7: There are two different kinds of peer support services; those that are billable to Medi-Cal and those that are not.

Medi-Cal Billable: These peer support services require certification as a peer provider under Medi-Cal through a DHCS authorized peer provider certification program. That kind of a program bills specialty mental health services and there are currently outpatient programs that include certified peers and can bill for the peer billing codes. This RFA would be an appropriate place to apply for that type of program.

Non-billable: Peer support programs that are not Medi-Cal billable programs that are operated through other funding sources (for example BHSA funding). These programs may be eligible under a separate procurement opportunity for programs that do not bill Medi-Cal: Behavioral Health Services Act-Funded Program Services Request for Proposals (RFP). This RFP contains sections for Full-Service Partnership (FSP) and Behavioral Health Services & Supports (BHSS) which both include different types of peer services. This RFP will be open January-February 2026 on the Supplier Portal <https://esupplier.sonomacounty.ca.gov/> .

Question 8: Our agency has 2 programs in the 1.4 service level - both supported housing programs. Do I need 2 separate entries on the graph of Form 1 Section 4 Service Provision Details?

¹ The Policy and Procedure can be found on the Behavioral Health Division's Website: [Policy 7.1.12 Coordination of Care](#)

Answer 8: Yes - if you could list the two (2) programs as two different rows on that table, that would be very helpful as they are a little bit different in their specialties and that would be the place where you can describe those differences.

Question 9: I had a few private practice offices ask about doing therapy for county, can they just choose to provide therapy on the application? One of them is not a non-profit and the other one is.

Answer 9: Yes – that would be an outpatient level of care. They would need to select whether they want to provide therapy for high-moderate or severe level intensity clients.

Question 10: Can you share how much funding is available for new and existing programs?

Answer 10: We are currently budgeting approximately \$9M for Adult SMHS for FY26-27. This number is subject to change as we complete the budgeting process with the Board of Supervisors.

Question 11: The recipients of the services under this RFA are DHS clients not necessarily a service provider's clients seeking behavioral health supports but are not connected to DHS Behavioral Health, is that right?

Answer 11: Yes, that is correct. They would need to be County clients to qualify for special mental health services, which is what this type of a contract would be. Depending on the nature of the program and the contract, some contracts are what are called self-authorizing where contractors are authorized to provide an initial assessment which then establishes the medical necessity for that level of care. Others are participants on the network, so County would have done the medical necessity establishment in advance through our access team. In the latter case, we build into the contracts a way to refer in the event that you have someone who is a client of your program that's not a client of the county, and you think they probably should be. We would work together to get them through the access process for consideration.

Question 12: If we have existing services, that have non billable peers - we can add peers as a billable code, correct?

Answer 12: Only if the peers are credentialed Medi-Cal certified peer providers. Then they could bill the peer services billing codes.

Question 13: What is the name of the nonbillable peer services procurement that will come out and what is estimated timeframe?

Answer 13: See Answer #7.

Question 14: Can you advise whether the current Mental Health Treatment Services, Adult Continuum of Care, RFA is based on CalAIM billing or cost reimbursement?

Answer 14: The RFA is based on CalAIM payment reform, not a cost-reimbursement model.

Question 15: To a recent question--we serve a lot of folks who would/should qualify for Behavioral Health, but who are not yet connected. Are we able to discuss this in our application

or request the ability to conduct the assessment ourselves with licensed clinicians? Or is that done during contracting?

Answer 15: Please include in your proposal that you would like to be considered for self-authorization. That would have to be negotiated in contracting as to whether we can approve that status. It is not guaranteed, but it is worthwhile to include that self-authorization is something that you would like to consider as part of your program design in becoming an access point.

Question 16: Do the locations need to be within Sonoma County?

Answer 16: No, but it is preferred to keep clients close to natural supports. For example, some high intensity wrap-around type programs currently are not located within Sonoma County because they serve conservatees in multiple locations.

Question 17: For clarity, we are not submitting budgets like previous RFPs. If agencies are chosen, we go into contracting discussion for services that we have written into the application.

Answer 17: Correct, you are not required to submit a budget as part of your application. Budgets will be requested as part of the contract negotiation process.

Question 18: Confirming Transitional Residential IS included in this level of care RFA but Crisis Residential is NOT?

Answer 18: Correct, this RFA includes Transitional Residential and NOT Crisis Residential levels of care.

Question 19: Is there a specific a date this is due?

Answer 19: Applications must be turned in by January 27, 2026 to ensure contract term will start on July 1, 2026. Applications received after Jan 27 are not guaranteed to start July 1, but would be considered for contract at the soonest possible date.

Question 20: How many members does Sonoma County serve?

Answer 20: The Adult Continuum of Care is serving approximately 2760 unduplicated clients at this time.

Question 21: On page 2 it asks about program capacity. Do they want the total of all programs or separated by program such as 34 total vs 13, 10, and 11?

Answer 21: Please list the capacity of each program individually rather than an overall total.

Question 22: What reimbursement rates are being proposed under the RFA?

Answer 22: Information about the reimbursement rate negotiation process can be found in Attachment A on pages 36-37.

All other terms and conditions of RFA DHS No. 25-048 remain unchanged.