

February 24, 2025

To: All Potential Respondents  
From: Katelyn Howells, Purchasing Agent  
Subject: 005-RFP-1551-2025 Iowa Disaster Case Advocacy Program

**Addendum One****Please amend the subject RFP to include answers to the following timely received questions:**

- Q1. The performance measures that refer to 75% - does this mean at the close of the unit? After the unit has been open at least a quarter?
- A1. HSEM recognizes performance measurements may progress during the lifecycle of a client's case. Performance measurements are for the duration of the program's activation and should be provided at each phase as outlined in reporting requirements.
- Q2. When discussing number of staff trained and available - is there a unit of measurement this will be? Is it FTEs? Is just the count of people who could do the work?
- A2. Standardized forms for reporting will be provided by HSEM. Reporting for the number of staff trained may be requested as both FTEs and the count of people who could perform the work.
- Q3. How will service areas be awarded? Will any preference be given to organizations that can cover all counties, or will counties be evaluated individually?
- A3. The first goal is to achieve 100% coverage across the state. It is possible that we may award more than one contract for an area based on the capability of the responding organization.
- Q4. Does HSEM reserve the right to alter the proposed service territory based on other RFPs? (For example, could a portion or portions of service territory in a proposal be awarded to another entity?)
- A4. The first goal is to achieve 100% coverage across the state. It is possible that we may award more than one contract for an area based on the capability of the responding organization.
- Q5. Is HSEMD looking for an administrative services organization model, or would they prefer to manage multiple contracts from multiple entities?
- A5. Prospective bidders should submit proposals of the model they intend to utilize to meet the criteria outlined in the RFP. HSEM will consider all proposed models.
- Q6. Suppose we collaborate with other state-wide organizations to support access for underserved and vulnerable populations. Would the training fund for DCA be utilized to train staff from the partner organizations to support program access, given we budget for it in our cost proposal?
- A6. Yes.
- Q7. Who is the point of contact for the contract overall on the state side?
- A7. During the RFP process, the point of contact is the Issuing Officer listed on the cover page of the RFP. During the life of the contract, the point of contact will be designated by HSEM.
- Q8. What support for meeting report obligations will HSEMD provide? Will there be a report template provided by HSEMD? What kind of report submission reminders and review will HSEMD provide? How many of the reporting requirements will covered as part of the current workbooks/dashboard?

- A8. All reporting to HSEM will be completed on standardized forms created by HSEM at defined intervals. HSEM will review all reports and provide feedback as appropriate. Specific reporting requirements are outlined in the RFP in section 1.3 Scope of Work.
- Q9. What level of surge staffing plan is expected? Does this extend beyond the initial activation of a single unit in an area? At what point does HSEMD consider to be the "breaking point" with a surge high enough that HSEMD would consider a deviation from the surge plan?
- A9. Provider surge plans should be developed according to the provider's needs and as they define their breaking points. During disasters providers are expected to communicate status updates to HSEM including surge capabilities and support needs. HSEM does recognize that exigent situations will occur. HSEM uses national standards for disaster case advocacy of 35:1 client to advocate ratio for appropriate staffing.
- Q10. What types of information and presentations would be expected to city/county/state agencies? How frequently are these presentations anticipated?
- A10. As outlined in the RFP, providers shall present information to city/county/state agencies and community partners about IDCA services. The frequency of these presentations should align with the provider's relationship building and community outreach efforts.
- Q11. What represents a formal relationship with community partners?
- A11. Ongoing outreach and relationship building with community partners is essential to the success of the program. Providers should define what a formal relationship looks like for them. Relationships with partners that can render assistance to a survivor will most likely be done in an informal fashion with the recognition that in some instances a formal MOU/agreement may be needed.
- Q12. When maintaining and entering client's information in the Agency's prescribed data tracking system, does the within three business days of receiving any and all client information include applications? Would there ever be exceptions to this? (Such as receiving an exceptionally high application count over a certain period of time?)
- A12. The expectation is that the provider's surge plan will ensure the three day timeline is met regardless of the application volume.

**Please acknowledge receipt of this addendum by signing in the space provided below, and return this letter with your proposal (do not send back separately).**

I hereby acknowledge receipt of this addendum.

---

Signature

---

Date

---

Typed or Printed Name