

KB01-21Q
PSYCHOLOGICAL ASSESSMENTS

SPECIFICATIONS:

The Hamilton County Department of Job & Family Services is requesting price quotes for psychological Assessments for Adult Protective Services. The Initial term of the Contract is January 1, 2022 through December 31, 2024 and one (1) two (2) year renewal.

All licensed psychologist(s) that come into contact with APS consumers shall have at least two (2) years' experience working with this population, having experience and extensive knowledge of the subject matter.

Resume and/or credentials must be submitted with the quote. Also provide 3 (three) customer references.

Any licensed Psychologist that come into contract with HCJFS consumers agrees to perform the geriatric assessment services and abide by the scope of service described below.

- a) The HCJFS adult protective services worker (APS) and/or APS supervisor will accompany the psychologist on assessment.
- b) The HCJFS APS worker will notify the individual's private physician or clinic first of the concerns and needs for assessment. If they are unable to assist, the APS worker will notify them that we are getting an assessment from the Psychologist. In some cases, the APS worker may not have knowledge of medical or psychiatric care the person has received.
- c) HCJFS will give the background information to the Psychologist when the referral is made.
- d) HCJFS reserves the right to request additional reports at any time during the contract period. It is the responsibility of Psychologist to furnish HCJFS with reports as requested. HCJFS may exercise this right without a contract amendment
- e) HCJFS reserves the right to withhold payment until such time as the requested and/or required reports are received.
- f) HCJFS will pay for a maximum of four (4) hours per evaluation unless otherwise approved by HCJFS. This includes travel time, mileage, telephone meeting, evaluation, prepare reports and testify in court.

- g) Services is to be provided at the request and authorization of HCJFS. This authorization will be made by a phone call to the Psychologist followed by an e-mail authorization.
- h) The assessment is to be conducted by a licensed psychologist who is experienced in the field of psychological assessment
- i) If necessary, Psychologist staff must be willing and able to testify in court regarding the assessments.
- j) The in-home assessment must be completed within ten (10) working days of the request by the APS social worker. If the APS worker believes the assessment needs to be completed sooner due to an emergency situation, the APS worker will notify the Psychologist when making the referral.
- k) A licensed psychologist must complete all written reports, including The Statement of Expert Evaluation. A typed report is required for every assessment and it must be received by HCJFS within seven (7) working days of the assessment. HCJFS will accept legible handwritten statements and reports.
- l) The licensed psychologist may not subcontract any of the services agreed to in this Contract without the express written consent of the HCJFS. All subcontracts are subject to the same terms, conditions, and covenants contained within in Contract. The licensed psychologist agrees it will remain primarily liable for the provision of all deliverables under the Contract and it will monitor any approved subcontractors to assure all requirements under this Contract are being met.
- m) Original invoices, signed by Provider or Provider's designee will be sent each month to HCJFS, 222 East Central Parkway, 3rd FL., Cincinnati, Ohio 45202, Attn: Adult Protective Supervisor within thirty (30) days of the end of the service month. Provider shall make all reasonable efforts to include all service provided during the service month on the invoice.

Miscellaneous

1. List any attribute, skill, or experience that would set you or your business apart from others in the field who perform psychological assessments or similar services.
2. List the contracted/freelance licensed psychologist that would provide psychological assessments under this Contract.

COST SHEET

Please list the rate per hour for psychological assessment services in the Cost Sheet below. The per hour rate shall include all expenses such as: travel time, mileage, telephone meeting, evaluation, and prepare reports.

Description of Service	3 Year Initial Term January 1, 2022 December 31, 2024	2 Year Renewal Term January 1, 2025 December 31, 2026	Rate Per Hour
Assessment Cost			
Other Cost			

PROVIDER NAME: _____

REPRESENTATIVE'S NAME: _____
(Please Print)

ADDRESS: _____

PHONE/FAX #: _____

EMAIL ADDRESS: _____

REPRESENTATIVE'S SIGNATURE: _____
Contacts:

Point of contact for questions – Kris Bullock

Kristin.Bullock@jfs.ohio.gov

Dates:

1. Potential Bidders can submit questions until: Friday, October 22, 2021.
2. HCJFS will respond to questions no later than October 29, 2021.
3. All Quotes are due to the HCJFS contact person by Wednesday, November 3, 2021.