



ADDENDUM I

SUBJECT: Request for Proposals, Early Childhood Therapy Services, (RFP 25-135; RFX 6100019312), Scheduled to Open: Monday, May 27, 2026; Date of Issue: Wednesday, April 8, 2026.

FROM: Stacey L. Czachor, NIGP-CPP, CPPB
Procurement Manager

DATE: April 28, 2026

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

THE ABOVE-MENTIONED REQUEST FOR PROPOSALS IS HEREBY AMENDED AS FOLLOWS:

- 1. Add: Pre-Submittal Sign In Sheet, this document will posted as a separate file.**
- 2. Revise: RFP Attachment B, Price Schedule.**

QUESTIONS SUBMITTED IN ACCORDANCE WITH SECTION 011, PRE-SUBMITTAL CONFERENCE:

Question 1: Do the restrictions on communication apply to unrelated current work a vendor is doing with Pre-K 4 SA?

Response: No, restrictions on communication only apply to discussions/interaction regarding this Early Childhood Therapy Services solicitation.

Question 2: When is it expected to hear whether you have or haven't been awarded?

Response: Vendor notifications may be delayed until June through September due to the Corporation Board Meeting schedule.

Question 3: What is the expectation of when the contract will start?

Response: The contract will start after Corporation Board approval, final negotiations with the Pre-K 4 SA and all contract documents are signed by the awarded vendor and Pre-K 4 SA.

Question 4: Will there be a lapse in child therapy?

Response: No, Pre-K 4 SA has a current contract that will remain in place until the new contract becomes effective.

Question 5: Do the providers need to be able to service 0-3 age range (Early Childhood Intervention services)?

Response: Preferably, yes. However, if they are only able to provide therapies to school aged children, we will continue to work with our local Early Childhood Intervention agencies and providers on an as needed basis.

Question 6: Are you expecting that all children will get initial evaluations through the school district?

Response: Expectation is that the school districts will fulfill their obligations. Pre-K 4 SA utilizes a referral process for the initial request.

Question 7: How many centers have infant and toddlers?

Response: At this time, we have one (1) center only that has infants and toddlers enrolled with approximately 35 infant/toddlers in the program.

Question 8: Is there an opportunity to bill the child's insurance for services?

Response: Pre-K does not currently utilize School Health and Related Services.

Question 9: Will Providers be primarily responsible for delivering services rather than conducting evaluations?

Response: Yes, services will be for for 3–5-year-olds. We initiate referrals and request evaluations through the Local Education Agencies through Child Find. If an Individualized Education Program is created, we will provide services based on the plan. If a child requires updated goals or eligibility, there may be instances in which the provider will evaluate to determine appropriateness of new eligibility area (i.e., Adding on Articulation to a Language eligibility). We are also able to provide interventions to children while they are going through the evaluation process, this may include reviewing recent clinical evaluations to create intervention goals and consultations with teachers. We adhere to frequency and duration of services within Individualized Education Program; however, we have the liberty to provide additional supports and interventions if needed. All progress notes and information related to goals and eligibility is provided to the Local Education Agency upon request and when child withdraws from program.

Question 10: Is there information provided about the volume of services to be provided?

Response: Yes, that information is in the Price schedule.

Question 11: So, the support from providers is not necessarily connected to the actual school district?

Response: Yes, each center has a representative specialist who communicates with the Program manager. Information is passed on to the School districts as is required and requested.

Question 12: Does the price schedule speak to how time should be submitted or is it flat- fee per month?

Response: The price schedule does not speak to how time is to be submitted but the contract will provide the time submission requirements. Timecards will need to be submitted to substantiate the hours that are billed.

Question 13: What are the quantities and caseload?

Response: Please refer to price schedule for historical numbers, however our current caseload sits around 245-250 children across the program.

Question 14: Will providers be housed on-site?

Response: It will vary based on center need. With the current need, providers are at the center 3-5 days per week.

Question 15: How many providers do you have that serve your current students?

Response: At this time, we have four (4) Speech Language Pathologists, four (4) Speech Language Pathology Assistants, one (1) Occupational Therapist and one (1) Physical Therapist.

Question 16: Does the program have any case managers?

Response: The Support Services Program Manager is the Case manager for the overall program, communication is funneled down to the Providers and to the Specialists at each center.

QUESTIONS SUBMITTED IN ACCORDANCE WITH SECTION 011, RESTRICTIONS ON COMMUNICATION:

Question 17: Is there a need for Behavior Analysts with this RFP?

Response: No, there is no need for Behavior Analysts.

Question 18: Can you advise if we need to quote on all positions (below) or can we select our specialties?

Response: Please provide quotes on services that you are able to provide in accordance with the RFP's Price Schedule.

Question 19: Since the district is leading IEPs, what exactly would the role of a contracted therapy team look like day to day? (a.) If IEP exists, are the contracted therapists only responsible for delivering on the IEP services? (b.) If IEP does not exist are the contracted therapists responsible for conducting evaluations? If so, to the evaluations go back to the district that then creates an IEP based on that data?

Response: The primary role of the therapy team is to provide direct therapy and consult support to the classroom teacher. If IEP exists, the contracted therapists are only responsible for delivering on the IEP services needed. If an IEP team does not exist, the therapy team would be responsible for either: (1) Reviewing clinical therapy plans to create an intervention. (2) Creating an intervention plan to utilize based on screeners. We do not recommend Full Evaluations to include standardized testing due to the school district conducting their own. (3) Full evaluations should only be conducted to determine necessity for ECI services.

Question 20: If a family does not enroll in the school district to get an IEP, will one be required in order to obtain therapy services? Or can contracted therapists create their own Plan of Care and implement that plan accordingly?

Response: The family does not need to enroll at the public school to request a child find evaluation. In the event that the family refuses to obtain an evaluation from the public school system, we would provide intervention strategies to support classroom instruction.

Question 21: Currently what is the average number of IEP Services per child per week per discipline being prescribed?

Response: On average, direct therapy is provided for 20-30 minute sessions, 1-2 times per week.

Question 22: What are the expectations for the documentation and reporting and at what level of detail? How should this document compliment the required IEP reporting?

Response: The documentation would entail the following: (1) Daily documentation of direct therapy sessions, including name of child, time of therapy, duration and skill worked on (documented on Procure). (2) Progress notes pertaining to Speech IEP goals would be due at the end of 9 weeks. Therapy team should be obtaining this data on a regular basis to be able to speak to speech goals (documented on a shared spreadsheet to support billed indirect services). (3) Therapist should have adequate data on child's progress available if a family inquires about status.

Question 23: Will the contracted therapy team use their own system to document, or a platform that Pre-K 4 SA provides?

Response: Pre-K 4 SA provides access to Procure (Service tracking for families), Remind (Family communication) and Smartsheets (to access caseload and child/family demographics).

Question 24: What is the typical frequency of requested documentation from the contracted therapy team?

Response: See response to question 22.

Question 25: For kids without an IEP, what level of support is expected? More classroom-based support and strategies that align with MTSS and/or direct therapy sessions?

Response: For children without an IEP, we create an intervention plan to support children through classroom instruction (Similar to MTSS). Classroom observation and consult would be expected by therapy team.

Question 26: For kids with an IEP but additional support is needed to make them successful in the Pre-K 4 SA classroom setting, is it expected / allowed that the contracted therapy team provide additional classroom-based support and strategies that align with MTSS and/or actual therapy sessions?

Response: Yes, it is expected for the therapy team to assist with support.

Question 27: Who can request or assign additional support for a child outside of their IEP services / frequencies?

Response: The therapy team will collaborate with Program Manager and specialist to determine what additional supports and services are needed, to include adjusting frequency and duration and method of delivery (pull out vs push in).

Question 28: Since Pre-K 4 SA already has an assigned case manager, how do you see that case manager and a case manager / service coordinator from the contracted therapy team working together to provide better care / more holistic support to the center and the family?

Response: The Pre-K 4 SA Case manager coordinates the referral of families to the school district through Child Find and provides support and advocacy to the families throughout the evaluation process. They also facilitate the instructional support plan process (our version of MTSS) across all centers to ensure that classroom interventions (including speech) are being implemented. A monthly meeting is held with Case Manager and contracted employee to discuss needs and we remain in constant communication throughout.

Question 29: Given that providers would be supporting evaluations, goal development and progress reporting, what level of participation is expected from our team at ART meetings? Would they or could they attend those meetings?

Response: The therapy team will provide present levels for children who they are already servicing in anticipated of scheduled Annual Review and Dismissal meetings. They will review education plan after meeting to implement therapy. All paperwork is written and managed by the evaluating school district and therapy team. In the event that collaboration is needed, it is facilitated by Program Manager.

Question 30: For evaluations and re-evals, how would responsibilities be shared between the district and contracted therapy team?

Response: Children are only with our program for their 3- and 4-year-old years. They typically do not receive re-evaluations within that time period. In the event that one is needed (going from language to articulation), the therapy team would communicate with Program Manager who will help the family to request through the district. While this is occurring, the therapy team can collaborate with teacher and adjust goals as needed.

Question 31: How will scheduling and coordination work each day between therapists and teachers and embedding into classroom daily routines?

Response: Classroom schedules will be provided to therapists along with caseloads and therapy team will work with Pre-K 4 SA therapists to create service schedule.

Question 32: Questions on “staffings” between Pre-K 4 SA team and the contracted therapy team:

- a. How often do these occur?
- b. Who is expected to be in attendance?
- c. Is there expected data from contracted therapy team to be provided / shared at these meeting?
- d. What is the reason / main outcome or goal of hosting these “staffings”?

Response: Responses addressed in order received:

- a. Once a month.
- b. Pre-K 4 SA direct point of contact, and/or any therapists.
- c. Not normally, no.
- d. To review numbers, caseloads, therapist staffing changes, information that needs to be relayed to contracted staff from the center and program.

Question 33: What is the expectation of the contracted therapy team to communicate with Pre-K 4 SA families of children we are serving?

Response: Communication is through Remind or via phone call. Communication with the family directly is not expected but appreciated when requested.

Question 34: Has there ever been a need or a want for teletherapy offerings?

Response: No, teletherapy can be utilized for supervision of SLA only.

Question 35: Can more than three (3) letters of reference be submitted?

Response: Yes, more than three (3) letters of reference can be submitted.

Stacey L. Czachor

Original Signature of Person Authorized to Sign Bid/Contract (Please Sign)

Stacey L. Czachor, NIGP-CPP, CPPB
Procurement Manager
Finance Department, Procurement Division

Signer's Name (Please Sign)

Vendor Name

Vendor Address

City

State, Zip code