

Psychiatric Mental Health Nurse Practitioner Services RFQ

Questions & Answers

Question	Answer
1 Will the PMHNP prescribe controlled substances?	No.
2 Please provide the current or historical budget/expenditure for the PMHNP services covered under this RFQ.	We can not release that information during an active solicitation, as the incumbent has also been invited to submit a bid.
3 Please confirm the current number of PMHNP and/or related provider FTEs supporting these services.	2 providers rotating 1 day per week - (0.20 FTE)
4 Is a physical office or business location in Tennessee required for a bidder to participate in this RFQ?	No.
5 Please confirm whether a Certificate of Insurance and Tennessee business license must be submitted with the quotation.	Neither is required with the quotation. Both will be required prior to the execution of the contract.
6 Please confirm whether a separate technical narrative is required, or whether submission of the completed Section 1 Service Requirements table and Attachment A Cost Proposal Sheet is sufficient.	No separate technical narrative is required. Please make all comments within the Service Requirements table.
7 Please confirm whether bidders are expected to complete and return the issued RFQ document, or whether a separate proposal format may be submitted incorporating the required compliance table and Cost Proposal Sheet, along with any additional information demonstrating the bidder's qualifications and capabilities.	A separate format may be submitted incorporating the required compliance table and Cost Proposal Sheet along with any additional information demonstrating the bidder's qualifications and capabilities. Please be sure to make all comments within the Service Requirements table.
8 Please confirm whether award will be based solely on the lowest Total Five-Year Cost among responsive and responsible bidders meeting all RFQ requirements.	Confirmed.
9 Please confirm whether quotations may be submitted either electronically by email or by hard copy via mail, as stated in Section 2.4.	Confirmed. Either type of submission is acceptable, as stated in the RFQ.
10 Please confirm whether copies of the PMHNP's RN license, DEA registration, and malpractice insurance are required with the quotation or only after award.	Documents will be required after the award and prior to the execution of the contract.
11 Please clarify whether the Contractor is responsible for providing the supervising physician and associated services, and whether Tennessee Tech has any specific qualifications or requirements for the supervising physician.	The Contractor is responsible for the supervising physician and associated services. The supervising physician must be specific to psychiatric mental health services.
12 Please provide the anticipated annual volume of new-patient evaluations, follow-up appointments, medication-management visits, and other PMHNP services for the contract period.	Anticipated annual volume range is approximately 25 student intakes, 138 follow up appointments, as stated in the RFQ.

13	Please confirm whether the required Tuesday 8:00 AM–4:00 PM onsite schedule represents one PMHNP for the full eight-hour period each Tuesday throughout the contract term.	Confirmed, and we prefer that we have the same PMHNP for the entire contract term, if possible, so they remain familiar of our operating practices and continuity of care for students.
14	Please clarify whether PMHNP services outside the required Tuesday 8:00 AM–4:00 PM onsite schedule are anticipated or may be requested during the contract term.	No onsite hours outside of the required hours of 8am-4pm are anticipated.
15	Please clarify how the Total Five-Year Cost will be calculated for evaluation purposes, given that submitted prices are firm for the first year and the RFQ permits the Contractor to request annual price increases thereafter.	We will add together the weekly PMHNP x 260 and the monthly attending physician charge x 60 as our basis for the award. Annual requests for price increases must be substantiated and are not guaranteed to be approved.
16	Please confirm whether bidders should provide only the Year 1 weekly PMHNP rate and monthly supervising physician rate, with any subsequent annual rate adjustments subject to the process described in Section 2.6, or whether Tennessee Tech expects bidders to provide rates for each of the five contract years.	The costs requested on Attachment A are the only calculations required.
17	Please clarify whether costs associated with the required 24/7 urgent-care availability, administrative activities, training, or other required services must be included in the weekly PMHNP rate or may be separately identified.	All costs associated with the services are expected to be included in the weekly PMHNP rate.
18	Please confirm whether Tennessee Tech University intends to make a single award or multiple awards under this RFQ.	We intend to make a single award.
19	Please confirm whether any additional forms, certifications, attachments, or supporting documents are required to be submitted with the quotation in addition to the completed RFQ, Section 1 Service Requirements, Bidder Information/ Signature page, and Attachment A Cost Proposal Sheet.	No other forms are required except those listed in question 19.
20	Please clarify whether bidders are required to provide only the fixed weekly PMHNP rate and monthly supervising physician rate in Attachment A, inclusive of all costs required to perform the services, or whether a detailed five-year pricing schedule showing annual rates and total five-year costs is required.	The costs requested on Attachment A are the only calculations required.
21	Please confirm whether Tennessee Tech will calculate the Total Five-Year Cost using the rates provided in Attachment A, and if so, please provide the methodology or assumptions (e.g., number of service weeks and months per year) that will be used for the five-year cost calculation.	The costs requested on Attachment A are the only calculations required. 52 weeks per year are billable.
22	Service weeks: Should pricing assume onsite services 52 weeks per year, or only during the academic calendar? Will services be required or billable on Tuesdays when the University is closed for holidays or breaks?	Onsite services 52 weeks a year are billable, even if the service day falls on a holiday or day closed for weather.

23	Total Five-Year Cost: How will the University calculate the Total Five-Year Cost from the weekly and monthly charges on Attachment A? Specifically, how many service weeks per year will be used, and will the supervising physician charge apply for all 12 months of each year?	52 service weeks will be used. The supervising physician charge applies for all 12 months.
24	On-call coverage: The RFQ states that a provider is to be available on call 24 hours, seven days per week through the Eagle Eye Crisis Hotline. Is the Contractor expected to provide this coverage directly, and should its cost be included in the weekly charge?	Contractor is expected to provide the service directly. It is included in the weekly charge.
25	Administrative tasks: Should time spent outside the Tuesday 8am–4pm clinic hours on administrative duties (student messages, refill requests, continuity of care meetings, and staff training) be included in the weekly charge, or may it be itemized separately?	This is included in the weekly charge.
26	Start date: The RFQ lists November 6, 2026 as the first date of clinical services, which falls on a Friday. Please confirm whether the first date of onsite service will be Tuesday, November 10, 2026.	The first date of clinical onsite services will be 12/1/2026.
27	Telehealth: Would the University accept telehealth for any portion of the clinical services, such as follow-up appointments or coverage on weeks when the provider is unable to be onsite? May administrative duties and on-call coverage be performed remotely?	Onsite is required each Tuesday from 8am to 4pm. Provider should be available by phone or email for student emergencies pertaining to a medication concern. Completion of notes are expected on date of service.
28	Please confirm whether a staffing/recruitment company may submit a quotation and provide qualified, licensed PMHNP personnel under the resulting contract, or whether the bidder itself must be a licensed healthcare provider/clinical organization.	A staffing/recruitment company may submit a quotation and provide the personnel. It is important, however, that we have the same 1 or 2 PMHNP providing the services so they remain familiar of our operating practices and for continuity of care for students.
29	Please clarify whether the Contractor is responsible for providing the required supervising physician, including the 20% monthly chart review and consultation requirement, or whether Tennessee Tech will provide the supervising physician.	The Contractor is responsible for providing the required supervising physician, including the 20% monthly chart review and consultation requirement.
30	The RFQ requires a provider to be available 24/7 through the Eagle Eye Crisis Hotline. Please clarify whether the contracted PMHNP is expected to provide this coverage and whether it is included in the weekly PMHNP rate.	The contracted provider is expected to be available in the event of an urgent situation pertaining to medication that has been prescribed. This is included in the weekly PHHNP rate.
31	Please confirm whether the weekly PMHNP charge must include all required services, including Tuesday onsite care, administrative duties, consultations, prescription refill requests, and 24/7 on-call coverage, or whether additional charges may be proposed.	The weekly PMHNP charge includes all required services.

32	Please confirm whether the historical volume of 25 first-time patients and 138 follow-up appointments should be used as the anticipated workload for staffing and pricing purposes.	Confirmed
33	Please confirm the minimum malpractice/professional liability insurance limits required for the PMHNP and supervising physician, as the RFQ requires proof of malpractice insurance but does not specify coverage limits.	\$1,000,000 Each Claim/\$6,000,000 Aggregate