

---

# Community Behavioral Health Support (CBHS) Services Clearinghouse

## RFP No. 2025HCA14

### Amendment No. 3

---

**Date Issued:** 9/12/2025

**To:** RFP Bidders

**From:** Kimberly French, RFP Coordinator

**Purpose:** Post Answers to Second Round of Bidder Questions.

This amendment hereby modifies and is attached to RFP No. 2025HCA14. All other terms, conditions, and specifications remain unchanged.

---

The above referenced solicitation is amended as follows:

1. HCA received the following questions from Bidders and responses are provided in the attachment below.

*Remainder of page left intentionally blank. Questions and Answers attachment to follow on next page.*

**RFP - 2025HCA14 - Community Behavioral Health Support (CBHS) Services Clearinghouse**

#	Section	Bidder Questions	HCA Answers
1	N/A	What % of the providers will already have a contract with the MCOs and what % will need assistance with credentialing and contracting?	Based on the number provided in the RFP in Exhibit F – Cost Proposal, HCA estimates that around 1,500 Adult Family Homes have a CBHS client and that there are 4,800 potential Adult Family Homes.
2	N/A	Are the MCOs aware of this program rolling out and are they offering any assistance with expedited credentialing and contracting, given the typical timeframe is 90 days.	MCOs are aware and they continue to work directly with Providers offering office hours, open forums, and fact sheets to support contracting with their plans.
3	N/A	Does HCA anticipate that the majority of participating facilities and providers will have advanced technical infrastructure for claims submission, or will most rely on more basic billing capabilities (if any)?	HCA experience would suggest many are using more basic billing capabilities.
4	N/A	What categories of providers are expected to bill for services under the program (e.g., licensed mental health counselors, master's-level clinicians, PhD-level psychologists, case managers)?	CBHS services are provided by staff in licensed Adult Family Homes. These staff are not required to have additional credentialing.
5	N/A	Can HCA publish a definitive list of approved procedure codes authorized for billing under the CBHS program?	For the published billing guide, see the HCA website at: <a href="https://www.hca.wa.gov/billers-providers-partners/program-information-providers/community-behavioral-health-support-cbhs-services">https://www.hca.wa.gov/billers-providers-partners/program-information-providers/community-behavioral-health-support-cbhs-services</a> .
6	N/A	Does HCA expect that most claims will be submitted on CMS-1500 forms, or will institutional/facility claims also be required?	Claims should be submitted to HCA in accordance with the HCA ProviderOne Billing and Resource Guide.
7	N/A	Can you please elaborate on this statement in the introduction, "If a facility is unable to meet the Targeted Case Management requirement, the Contractor will either help the facility to identify a qualified provider or the Contractor will supply a qualified provider(s) to the facility to fulfill this requirement". What are the requirements of a "qualified provider"? If Contractor supplies a qualified	This requirement was removed from the solicitation in RFP Amendment 2 posted to WEBS on 9/2/2025.

		provider, would Contractor bill separately for the resource as a provider? Or would this expect to be budgeted in scope.	
<b>8</b>	N/A	Can eligibility be verified using Availity or would contractor have to subscribe to multiple payer portals for eligibility verification?	The contractor will need to verify eligibility with the payor portals required by the client's Managed Care organization and ProviderOne.
<b>9</b>	N/A	Are there any pre-authorization or referral requirements that Contractor would be required to facilitate for each potential claim?	The contractor will not be required to assist with referrals for services but will need to ensure referral information is available to support claims submission.