

**VALUE BEHAVIORAL HEALTH OF PENNSYLVANIA (VBH-PA)  
 IN PARTNERSHIP WITH  
 THE BEHAVIORAL HEALTH/DEVELOPMENTAL SERVICES (BH/DS)  
 PROGRAMS OF  
 ARMSTRONG, INDIANA, LAWRENCE, BUTLER, WASHINGTON AND  
 WESTMORELAND COUNTIES  
 HAVE ISSUED A  
 REQUEST FOR PROPOSALS (RFP)  
 FOR  
 EXTENDED ACUTE CARE SERVICES**

**INSTRUCTIONS FOR SUBMISSION:**

*All completed RFPs must be submitted to the address below:*

U.S. Postal Mail	Hand Delivery or by UPS/FedEx Overnight
Value Behavioral Health of Pennsylvania P.O. Box 1840 Cranberry Township, PA 16066-1840 Attention: Charlotte Chew, Provider Relations Director	Value Behavioral Health of Pennsylvania One Adams Place, Suite 100 300 Seven Fields Boulevard Seven Fields, PA 16046 Attention: Charlotte Chew, Provider Relations Director

- *Five (5) original, unbounded and unstapled proposals must be received by 4:00PM on Monday, November 13, 2017.*
- *Late proposals will not be accepted.*
- *Faxed or e-mailed submissions will not be considered.*
- *All pages of the proposal must be numbered.*
- ***COVER LETTER:** All submissions must have an accompanying cover letter identifying the following information:*
  - Agency Name*
  - Date of Submission*
  - Address*
  - Contact Person for the Response:*
    - Name*
    - Phone*
    - Email*

Value Behavioral Health of Pennsylvania (VBH-PA) in partnership with the Behavioral Health/Developmental Services Programs of Armstrong, Indiana, Butler, Lawrence, Washington and Westmoreland Counties (SW6 Counties) have identified the need for the development of a hospital-based (General or Specialty Hospital) Extended Acute Care (MH/ID EAC) program that will specialize in serving individuals struggling with both mental health and intellectual disabilities (MH/ID).

## **BACKGROUND**

Dually diagnosed (MH/ID) individuals experiencing acute symptoms of serious and persistent mental illness (SPMI) often do not stabilize within a few weeks. Frequently these individuals remain at the most intensive inpatient level of care for extended periods of time, often due to a lack of appropriate or accessible stepdown services that can meet their unique needs. VBH-PA and the SW6 Counties have identified that the development of a hospital-based MH/ID EAC specializing in this population would better meet the needs of this unique population.

A hospital-based Extended Acute Care (MH/ID EAC) will provide an additional level of treatment for individuals who would benefit from a longer period of treatment beyond an acute inpatient unit, yet are not in need of long-term institutionalization. A MH/ID specialized MH/ID EAC will provide the necessary treatment services and supports for these individuals while ensuring they are able to remain in their home community.

The MH/ID Extended Acute Care facility will be a sixteen (16) bed or less short-term, hospital-based residential unit licensed by the Office of Mental Health and Substance Abuse Services (OMHSAS). The MH/ID MH/ID EAC will be a community hospital-based program (General or Specialty Hospital) serving Medical Assistance recipients 18 years and older who meet the criteria for serious mental illness as defined by Bulletin OMH-94-04, have a diagnosis of an intellectual disability, and who require extended residential psychiatric treatment services.

The MH/ID EAC must be Medicare reimbursable and be fully prepared to bill Medicare for Medicare eligible persons and stays.

The MH/ID EAC provider must have a business plan to provide services at or under a VBH-PA contracted rate of \$500.00 per day.

The MH/ID EAC will provide a longer period of inpatient treatment services in a recovery oriented environment that permits an individual to stabilize and return to the community while avoiding unnecessary hospitalizations in a state psychiatric hospital.

Contingent upon the availability and approval of potential funding, the SW6 Counties **may** be able to provide the awarded agency with approximately \$1.2 million dollars to assist with program start-up costs. If these funds become available they may be utilized at the sole discretion of the SW6 Counties to assist with the costs related to facility or real estate purchase, renovation or purchase of fixed assets or operational start-up costs. The award of a contract pursuant to this RFP is NOT a guarantee of funding for the awardee.

**All services provided for this level of care must adhere to all respective federal, state and local standards and regulations.**

## **TARGET POPULATION**

The target population is adult HealthChoices eligible residents of these Counties who are dually diagnosed with serious and persistent mental illness (SPMI) and an intellectual disability who would benefit from a specialized extended acute level of care in a community setting.

An individual who is diagnosed with an intellectual disability has significant limitations both in intellectual functioning (i.e., problem solving, reasoning difficulties; IQ <70) and adaptive behavior (i.e., conceptual, social, and practical skills). Often, such individuals have difficulty reading, writing, or verbally expressing themselves. These limitations may have a significant impact on accurately diagnosing mental illness as well as designing and implementing recovery-focused clinical interventions that meet the individual's acute mental health needs.

In addition to those who currently have a diagnosis of SPMI, the MH/ID EAC will also benefit individuals with undiagnosed mental disorders. In many instances, undiagnosed mental disorders remain untreated for many years and cannot be effectively diagnosed in a short period of time. Establishing a beneficial treatment plan, including a medication regimen, can also be challenging when an individual is acutely symptomatic. In this type of situation, the MH/ID EAC will provide the opportunity for observation and evaluation over a period of time to enhance the diagnostic process and development of an appropriate treatment plan.

The MH/ID EAC facility will also serve individuals who struggle with maintaining their recovery outside of a structured, residential psychiatric setting. These individuals face difficulties in managing their illness and maintaining their recovery in the community, often experiencing multiple community and state hospital re-admissions. Experience has shown us that adhering to a medication regimen is challenging; however, failure to do so can lead to de-stabilization in the community necessitating a hospital admission to restart and/or adjust medication. This can be a long and stressful process that may not be effectively managed by a shortened stay on an inpatient unit, yet often does not require the restrictive, longer-term setting of a state hospital.

## **SERVICE OBJECTIVES**

The MH/ID EAC program will serve adults age 18 years of age and older who have been identified as benefiting from a specialized, extended acute level of residential psychiatric care. The expected service objectives of the MH/ID EAC will be, at a minimum, to:

- Increase the availability and access to a high quality, specialized, recovery-oriented, residential, psychiatric acute care services;
- Meet the treatment needs of adults through a program which utilizes research-based, best practice services designed to assist individuals in achieving long-term, stable recovery-based lifestyles in our community;
- Develop strong alliances with the other service agencies, through ongoing professional collaboration with community supports and collateral organizations in order to benefit the individuals involved in this level of care.

## **REQUIRED MINIMUM QUALIFICATIONS**

**In order to respond to this RFP, the provider must meet ALL of the following minimum qualifications.**

1. The provider must be able to secure the appropriate Pennsylvania certifications and/or licenses to provide a specialized, MH/ID EAC program located within the SW6 County region. This includes licensure as a hospital.
2. The provider must currently be, or be able to become, fully credentialed with Value Behavioral Health of PA to provide these mental health treatment services to HealthChoices members.

### **Additional Preferred Qualifications:**

1. Provider has experience in providing acute or extended acute care services to the MH/ID population.
2. Provider has existing collaborative relationships with local physical health, emergency services and other human service agencies and support resources for this population.
3. Provider is experienced working closely with a Dual Diagnosed Treatment Team (DDTT).
4. Provider has experience in providing mental health services to individuals with co-occurring disorders (e.g. mental health, intellectual disabilities and substance abuse).

## **INTENT**

It is the SW6 Counties' and VBH-PA's intent to solicit proposals for the purpose of executing a contract. This notwithstanding, any proposal shall be submitted with the following expressed understanding:

- This Request for Proposals is not subject to the competitive bidding process, and any contract entered into as a result of any proposal will not be based on the concept of the "lowest cost applicant";
- The SW6 Counties and/or VBH-PA have the right to reject any and all proposals at any time during the process;
- The SW6 Counties and/or VBH-PA may modify the selection process or the scope of the project or the required responses at any time;
- All costs of developing proposals and any subsequent expenses relating to contract negotiations are entirely the responsibility of the applicant and may not be charged to the SW6 Counties and/or VBH-PA.

## **INCURRING COSTS**

The Partners are not liable for any costs incurred by applicants for work performed in preparation of a response to this RFP.

## **PROPOSAL REVIEW**

VBH-PA and the SW6 Counties reserve the right to reject any and all proposals received as a result of this RFP, and to negotiate separately with competing applicants. If all proposals are unacceptable, any of the partners reserves the right to reject the proposals and to issue a new RFP. These partners reserve the right to reject a proposal at any time during the process.

## **SELECTION/REJECTION PROCEDURE**

Applicants whose proposals are selected will be notified in writing that they were selected. Applicants whose proposals are not selected will also be notified in writing by VBH-PA. The SW6 Counties and/or VBH-PA may request a face-to-face presentation from respondents.

## **RFP AWARD CONDITIONS**

Following award of the RFP, in order to secure a contract with VBH-PA for payment of this service, the awarded provider must be able to achieve the following expectations. If the chosen provider cannot complete any one of the following expectations, they will be determined ineligible to continue the process:

- Currently hold a license to provide hospital-based, inpatient psychiatric services in Pennsylvania;
- Secure all appropriate licenses and approvals from DHS to provide a specialized, MH/ID EAC program located within the SW6 County region;
- Successfully complete the VBH-PA credentialing process to become a provider of this service in the VBH-PA HealthChoices network.

## **UPON AWARD**

After successfully securing a PA state license for this level of care and completion of the VBH-PA credentialing process, the awarded provider will receive a HealthChoices agreement for MH/ID EAC eligible HealthChoices members actively participating in the program.

***There is no commitment by the partners beyond what is directly stated in this RFP.***

***The award resulting from this RFP does not ensure that the need in the community is sufficient to support the development and/or sustainability of this service.***

If your agency meets the Minimum Qualifications listed above, please respond to this Request for Proposal (RFP) by following the directions below.

**Directions:**

1. Be sure your agency meets all of the above minimum qualifications prior to completing your response;
2. Respond to the questions in the sequence that they appear in the RFP and as completely as possible;
3. There is no page limit to responses and all responses must be typed using 12 pt. font;
4. Additional supporting or requested documentation should be attached as Appendices.

Questions pertaining strictly to information contained in the RFPs may be submitted in writing via email to

[Kimberly.tzoulis@beaconhealthoptions.com](mailto:Kimberly.tzoulis@beaconhealthoptions.com)

by **close of business Friday, October 27, 2017**. All questions and answers will be posted on the VBH-PA website the following week. Continue to check the website daily at:

[http://www.vbh-pa.com/provider/prv\\_rfp.htm#proposals](http://www.vbh-pa.com/provider/prv_rfp.htm#proposals)

## Request for Proposal

Please provide the following information regarding your interest in or ability to develop and operate Extended Acute Care (MH/ID EAC) services for adult HealthChoices residents of the SW6 Counties.

### I. Agency Organizational Structure, Background and Experience

1. Please provide a brief overview of the agency, its history, mission, and experience serving this target population. Please describe in detail the agency's background, experience and present activity, as well as the philosophy of the organization which will enable it to successfully provide the proposed service to this target population in the following areas:
  - a. At the administrative level (5 pts)
  - b. At the direct service level (5 pts)
2. Describe your agency's experience in collaborating and coordinating with the multiple adult social service systems in. (5 pts)

### II. Programmatic Information

3. Describe the agency's statement of purpose in providing MH/ID EAC services. Outline how these services would fit into the agency's mission and articulate the agency's goals and objectives in meeting the needs of individuals identified as benefiting from these services. Describe any of the agency's unique characteristics that would directly benefit this target population. (10 pts)
4. Please describe in detail the agency's organizational capacity and background and experience in providing MH/ID EAC services, as well as the philosophy of the organization which will enable it to successfully provide the proposed services to this target population. (10 pts)
5. Describe in detail some of the characteristics of this target population and how these characteristics would be addressed. If the agency considers itself to be a specialist in treating certain diagnostic categories or disorders, please describe (explain why) and provide any relevant supporting documentation. Also provide documentation/verification of expertise in serving special populations. (10 pts)
6. Describe the agency's projected MH/ID EAC program's staffing structure (e.g. number of administrative staff, direct treatment staff, clerical support staff and all other staff related to the delivery of this service), and the job responsibilities of MH/ID EAC program staff members. Please attach an organizational chart depicting the structure of this program. Also attach an organizational chart depicting where this program fits into the agency's overall organizational structure. (10 pts)

7. Although the awarded provider will work directly with the SW6 Counties and VBH-PA to design and develop the program goals and structure, please describe the potential MH/ID EAC program that your agency feels would best meet the needs of this target population. Describe the program components including: approach to service delivery, program philosophy types of interventions that will be employed, admission criteria, length of stay, description of a typical day, staffing patterns and qualifications, necessary staff training and linkages with other key service/support providers. (10 pts)
8. Describe how your agency would expect to conduct the assessment and treatment planning processes (e.g. What instruments may be used to perform assessments? Describe the expected treatment review and discharge planning process. What mechanism could be used to ensure that the member and other agencies will be included in the treatment planning process?). (10 pts)
9. Describe the agency's experience and approach to addressing individuals with co-occurring disorders (i.e. mental health, intellectual disabilities and substance use). (10 pts)
10. Historically, the County MH/ID Program has worked directly with many of the individuals who would benefit from this new intensive, residential level of care. Having the benefit of that historic perspective can be beneficial in addressing an individual's current needs. Please outline your agency's plan and processes on how to best interface with the County MH/ID office to best serve the current needs of these complex individuals. (10 pts)
11. Describe the role cultural competency plays in the delivery of the proposed services and throughout your agency. Outline specific activities that may be included in the proposed program which will address and improve cultural relevance of the program for participants. Explain how cultural differences could be integrated into the program and in what capacity can cultural competency serve as the mechanism for addressing behavioral health disparities in the program and in the agency. (10 pts)
12. Describe what measures will be in place to identify successful discharge indicators. Be sure to fully explain how the agency will identify and address the following through your outcome measurement/evaluation process; treatment progress, quality of life indicators and feedback/input from the individual. (10 pts)
13. Describe the agency's potential plan for continuous quality monitoring and improvement. Outline what outcome measures could be in place that would demonstrate the effectiveness of the program. (10 pts)

Outcome measures should be based on resiliency-oriented principles such as:

- Improving quality of life
- Individual and family satisfaction
- Improving community and educational integration
- Participation in meaningful activities and social relationships
- Discharge Choice



- Peer and Community supports
- Achieving positive clinical outcomes

14. Please give one or two examples of past efforts your agency has made in evaluating programmatic outcomes of services you have provided. Outline the results of those efforts. (10 pts)
15. Describe your agency's commitment to the concepts of recovery and resiliency. Explain how you intend to ensure ongoing program focus on the concepts of recovery and resiliency, including how individuals will be involved in the planning and implementation process. (10 pts)

### **III. Potential Available Funding**

16. Provide a comprehensive, line item budget with narrative for the entire proposed program. Also include an outline of the expected start-up costs that may be covered by available funds. (10 pts)

### **IV. Potential Bonus**

17. Provide any other information the organization would like to offer, such as letters of recommendation, to support the proposal. *(5 bonus pts)*

### **REQUIRED ATTACHMENTS**

**IF THESE REQUIRED ATTACHMENTS ARE NOT PROVIDED, THE SUBMISSION WILL NOT BE CONSIDERED COMPLETE AND WILL BE EXCLUDED FROM THE REVIEW PROCESS.**

Attach all the necessary documentation to demonstrate that your agency meets the following Minimum Qualifications to respond to this RFP. Please ensure that the documentation is current and reflective of the appropriate minimum standard. Also, for appropriate criteria listed below, provide a timeline outlining when your agency can be expected to complete/meet the criteria.

1. Must be able to secure the appropriate PA certifications and/or licenses to provide a specialized, MH/ID EAC program located within the SW6 County region. **(Attach copy of current license OR attach a plan that outlines the action steps and time frames to achieve this). (10 pts)**
2. Must be, or be able to become, fully credentialed with Value Behavioral Health of PA to provide these mental health treatment services to HealthChoices members **(Attach documentation of credentialing status OR attach a plan that outlines the action steps and timeframes to achieve this). (10 pts)**

Total points possible without bonus points – 175

**End of RFP**