



**Request for Proposal (RFP) Announcement  
Advanced Access (Crisis Services)  
for the Alamance-Caswell Catchment Area  
319 North Graham-Hopedale Road, Burlington, NC 27217**

**June 15, 2011**

**The Alamance-Caswell LME is joining PBH effective September 1, 2011. PBH is seeking Requests for Proposal (RFPs) from providers to deliver Advanced Access services (to include current Walk-In Crisis Services provided by the Alamance-Caswell LME), to adults and children with Mental Health, Intellectual/Developmental Disabilities, and/or Substance Use/Abuse issues in Alamance and Caswell Counties.**

**Background of RFI:**

The Alamance-Caswell LME has been operating the Walk-in Crisis Center at 319 N. Graham-Hopedale Road in Burlington, NC. As the Alamance-Caswell LME partners with PBH and prepares to become a part of the NC MH/DD/SAS and NC Innovations Medicaid Waivers, providing services directly and administering a Medicaid Waiver is a conflict of interest.

The Walk-in Crisis Center has provided face-to-face emergency services to persons with mental health issues, intellectual/developmental disabilities, and substance use/abuse issues. These services have included:

- Emergency/Crisis evaluations including triage, comprehensive assessment, crisis management/stabilization, and referral;
- Assessment and referral of non-emergent walk-ins;
- First evaluations for involuntary commitments;
- Jail consultations for both Alamance and Caswell Counties;
- Follow-up with consumers discharged from State or local inpatient psychiatric facilities and ADATC;
- Assessments for children/adolescents referred by the local school systems;
- Guardianship evaluations;
- Facilitate applications for medication assistance programs for consumers;
- Provide sample meds and \$4.00 formulary prescriptions for consumers on fixed or limited income;
- Telemedicine services for Caswell County consumers;
- Assessments and short-term services for uninsured/under insured consumers.

Alamance and Caswell Counties do not currently have public transportation. The Walk-in Crisis Center has provided transportation for Caswell County residents to and from the Walk-in Crisis Center on Wednesday of each week and also offers transportation daily to hospital follow-up appointments.

**Location of the Facility:**

Advanced Access shall continue to be located at 319 North Graham-Hopedale Road in Burlington, NC. This will be considered an “in-kind” contribution under this RFP.

**Access:**

Advanced Access will be staffed and available from 8:00 AM to 8:00 PM Monday through Friday. Consumers receiving services through Advanced Access include persons with mental health issues, intellectual/developmental disabilities, and/or substance use/abuse issues.

**Target Population:**

Consumers receiving services through Advanced Access include persons with mental health issues, intellectual/developmental disabilities, and/or substance use/abuse issues.

**Services:**

Services provided at Advanced Access shall include, however, are not limited to:

- Emergency/Crisis evaluations including triage, comprehensive assessment, crisis management/stabilization, and referral;
- Assessment and referral of non-emergent walk-ins;
- First evaluations for involuntary commitments;
- Jail consultations for both Alamance and Caswell Counties;
- Jail Diversion Services funding for the Jail Diversion Liaison position will be a part of the Advanced Access RFP.
- Follow-up with consumers discharged from State or local inpatient psychiatric facilities and ADATC;
- Assessments for children/adolescents referred by the local school systems;
- Guardianship evaluations;
- Facilitate applications for medication assistance programs for consumers;
- Provide sample meds and \$4.00 formulary prescriptions for consumers on fixed or limited income;
- Telemedicine services for Caswell County consumers (Telemedicine equipment will be provided in the award of this RFP);
- Assessments and short-term services for uninsured/under insured consumers.

**Transportation Issues:**

Alamance and Caswell Counties do not have a public transportation system. The provider awarded this RFP will contract with the Alamance County Transportation Authority (ACTA) to provide transportation for consumers from Caswell County to Advanced Access a minimum of one day per week. The provider will notify ACTA of consumers to pick up and shall invoice PBH on a monthly basis for consumers transported to and from Advanced Access by ACTA.

**Reimbursement:**

Reimbursement for Advanced Access shall be a combination of county non-UCR funds, State non-UCR funds, State UCR funds, and Medicaid (billed to PBH effective October 1, 2011).

**Program Budget:**

The RFP Application process requires that all agencies submit a detailed budget for the operation of Advanced Access. The budget should include any start-up considerations as well as ongoing expenses.

**Positions and Staffing:**

This program must include the following positions at a minimum. If the provider plans to gain economies of scale by combining with existing positions they may have, please make note of this and how many of the existing program staff the provider is interested in transitioning.

- 1.5 FTE Physician
- 1. FTE Jail Diversion/QP
- 1 Licensed Independent Practitioner
- 1 Receptionist
- 1 Medical Records Administrative staff

**Authorizations for Service:**

Authorization is not required for assessments and crisis intervention services delivered by the contracted Advanced Access provider.

**Documentation:**

- A. CONTRACTOR shall document all services provided and must assure that the documentation is in compliance with the following:
  - 1. The applicable Records Management and Documentation Manual for Providers of Publicly-Funded MH/DD/SA Services, CAP-MR/DD Services, and Local Management Entities (APSM 45-2), Rules for Mental Health, Developmental

- Disabilities and Substance Abuse Facilities and Services (APSM 30-1), and/or applicable policies of the Division of Medical Assistance
2. Documentation must support services provided and as delineated in the goals of the client's crisis plan (if applicable); and
  3. Documentation must reflect/support the billing diagnosis, the number of units provided and billed, and the standards of the billing code; and
  4. CONTRACTOR shall maintain clinical documentation supporting client's services provided and shall provide such documentation to LME upon request.
- B. CONTRACTOR, upon the request of PBH's Utilization Management Department, shall within five (5) days of request, provide additional documentation for more in-depth review. Material may include, but is not limited to:
1. Original or certified copies of the clinical assessment that supports the Level of Care provided;
  2. Original or certified copies of the progress notes;
  3. Original or certified copies of the crisis plan;

**Reporting:**

- Electronic reporting capacity is required for outcomes and reports required by PBH at the time services are implemented.
- PBH will provide the contracted provider of Advanced Access a report format to be completed and submitted to PBH on/or before the 10<sup>th</sup> day of each month. The report shall be submitted on time and shall include the Unique ID of persons requesting/receiving service and timeliness of services provided based on the NC Division of MH/DD/SAS standards for emergent, urgent, and routine care.
- Stakeholder Satisfaction - The selected provider will conduct and report the outcomes of Stakeholder satisfaction assessments/surveys requested. This is to occur at a minimum of one (1) time per year. Participation will include distribution and collection of satisfaction assessment forms within given timelines. The selected provider will take measures to ensure that all surveys returned are treated in a highly confidential manner.

**Performance:**

- Service provided at Advanced Access shall be performed in accordance with the NC Division of MH/DD/SAS timeliness standards for emergent, urgent, and routine care (2 hours for emergent, 48 hours for urgent, and 14 calendar days for routine). Emergent access is defined as having a qualified provider on the physical premises ready to provide immediate care as soon as the consumer is available to receive care. Urgent is defined as having access or treatment within 48 hours. Routine is defined as having access or treatment within 14 calendar days.

- Maintain documentation of activities, training, consultation, reports, research, or services that are required by Contract.
- Reports, research, or service documentation shall be submitted within seven (7) days of the request being sent by the LME or as per the schedule established through the Contract process.
- Contracted provider shall develop a Contractual Cultural Competence Plan for review and approval by PBH's Quality Management Department. The plan shall ensure all staff are trained, and training documentation is available for review.

**Collaboration with Stakeholders:**

The provider shall work collaboratively and have positive relationships with PBH and community agencies such as: local police, sheriff, magistrates, hospitals, Department of Social Services, Department of Juvenile Justice, Mobile Crisis and schools to optimize services for consumers.

It is essential that the Advanced Access provider work collaboratively with the community. This collaboration should include presentations, meetings, relationship building, education, advocacy, memberships and other means of bringing the community together to support the Crisis Service and the Crisis Service to support the needs of the community. It is PBH's expectation that the provider selected to provide the 8am to 8pm Advance Access Services for the Alamance Caswell catchment area will be familiar with local resources.

Some examples of these stakeholder resources are as follows:

- Department of Social Services
- Alamance Regional Medical Center
- Alamance-Burlington School System
- Caswell County School System
- Department of Juvenile Justice
- Dispute Settlement Center
- Law Enforcement
- Family Justice Center

Some examples of Community Resources are as follows:

- Allied Churches
- Drop-In Center
- Women's Resource Center
- Loaves and Fishes
- Salvation Army
- Goodwill Industries
- Community Service Center

In addition, the Advanced Access provider must be aware of other providers in the community and the resources they provide for those with mental health issues, developmental disabilities and substance abuse issues.

**Related to marketing, the Provider must be willing to:**

- Advertise Advanced Access to the community via print, website and presentation.
- Educate the community concerning the provider agency and the service provided.
- Inform the provider community of the service and guidelines for accessing the service.
- Have business cards and directions readily available on website and in written form to distribute.

**Prospective Provider Requirements:**

To be considered for the Alamance-Caswell Advanced Access Project at 319 North Graham-Hopedale Road, Burlington, NC, a Provider must meet the following requirements as noted in the RFP and:

- Be a contracted PBH Provider in good standing with PBH **or** be eligible to contract with PBH and provide services to all eligible individuals in the Alamance-Caswell catchment area;
- Provider must meet all requirements of the RFP and the PBH Provider Application and Contract; and
- Transition existing Walk-in Crisis Services to Advanced Access and be fully operational no later than September 1, 2011 (A facility license is not currently required for this program); and
- Not have any Type A or pending sanctions with DFS; and
- Not have a current investigation of Medicaid fraud or judgment involving Medicaid fraud within the past five (5) years that would constitute grounds for disqualification from the process.

**Special Considerations:**

1. PBH is interested in economies of scale and preference will be given to providers who operate other enhanced and/or crisis services such as ACTT and/or Mobile Crisis.
2. Additional points will be awarded in the RFP scoring to applicants that indicate a willingness to employ current program staff.

**Timeline:**

1. **Prospective Providers must submit in writing a Letter Of Intent to file including their ability to meet all requirements in the RFP announcement by no later than the close of business (5:00 P.M. ) on June 23, 2011. The PBH Provider must submit it in writing to:**

**Chuck Hill  
PBH Network Operations Department  
245 LePhillip Court NE  
Concord, North Carolina 28025**

2. **Mandatory Bidders Conference will be held on:**

**June 29, 2011**

**10:00 am – 12:00 pm**

**Alamance Human Services Center  
319 N. Graham Hopedale Road  
Burlington, NC 27217**

3. The RFP application shall be emailed to attendees of the Bidders Conference on **June 30, 2011**.
4. RFP Applications shall be due to PBH by no later than the close of business (**5:00 PM**) on **July 14, 2011**. Late applications shall not be accepted. Prospective Providers must submit hard copies (printed) of their RFP applications, applications submitted electronically will not be accepted. Three copies of the proposal shall be submitted to:

**Chuck Hill  
PBH Network Operations Department  
245 LePhillip Court NE  
Concord, North Carolina 28025**

5. The Provider Relations and Quality Management Departments will begin the review of applications on July 15, 2011 and notify the three candidates with the highest review scores of their selection for the stakeholder interview process. All Prospective Providers should provide a phone number they can be contacted at for the purpose of notification of their selection for the interview process.

6. Stakeholder Interviews for the finalists will be conducted on **July 22, 2011**.

**Location To be Announced**

7. All finalists will be asked to provide a phone number they can be contacted at no later than 5:00 pm on **August 1, 2011** for the purpose of notification of the award of this RFI.

**Please remember the Bidders Conference on June 29, 2011 from 10 am until 12 pm is mandatory.**

**Providers that do not attend the Bidders Conference will not be eligible to participate in the RFP.**