



PBH Request for Proposal (RFP) Announcement

Development of Residential Program for MR/MI Persons (Two Programs, 3 bed occupancy each)

Introduction

PBH is a Local Management Entity (LME) created pursuant to Chapter 122 C of the North Carolina General Statutes, and is the entity responsible for managing Mental Health, Developmental Disability, and Substance Abuse services for residents of Cabarrus, Davidson, Rowan, Stanly, and Union counties located in the piedmont region north and east of Charlotte. PBH serves a geographical area that is both rural and urban, and which also has a rapid population growth. We are the largest multi-county entity in North Carolina, having a population exceeding 644,000.

PBH's role is to manage financial resources and direct services to people in need of mental health, developmental disability and substance abuse care. These services are provided through a Network of Provider Agencies and Licensed Practitioners that are located across the five counties and which are under contract with PBH. Our goal is to develop a consumer and family driven system that is capable of making continual adjustments to meet the changing needs and choices of our citizens in need of services and supports. The values of Recovery, Empowerment, Self-Determination, Person Centered Planning and Consumer and Family driven services are the foundation of the system that is being reengineered at PBH, as part of North Carolina's Mental Health System Reform Initiative.

PBH Residential Programs for MR/MI Persons Initiative RFP/RFI

PBH has identified the need at this time for two residential programs (3 beds each) to serve MR/MI persons within the PBH catchment area.

The service requested in the RFP is targeted to serve adults with multiple co-occurring disorders in a residential, community-based setting. These individuals may have experienced or are at-risk of multiple inpatient hospitalizations resulting from failure of existing service systems to adequately assist them with managing their symptoms and/or behaviors. The overall goal of these programs should be to offer individuals served with stable, supportive living environments in which they can feel safe and afforded the opportunity to maximize their potential for personal growth and success in the community. These individuals, generally, are eligible to receive an array of Medicaid and/or state funded reimbursable services.

RFP Timeline and Process

RFP Announcement

The MR/MI Residential Program RFP application shall be posted on www.pbhcare.org on **September 30, 2008**.

Letter of Intent

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 October 7, 2008**. The PBH Provider must submit to:

Reid Thornburg
Provider Relations Manager
PBH Network Operations Department
245 LePhillip Court NE
Concord, NC 28025

Mandatory Bidders Conference

A Mandatory Bidders Conference will be held to allow all interested providers the opportunity to ask questions relevant to the RFP for MR/MI Residential Program:

**Mandatory Bidders Conference will be held on:
October 9, 2008 from 1:30 pm – 3:30 pm at the PBH
Copperfield Training Room**

RFP – Proposal Submission

Proposal shall be due to PBH by no later than the **close of business (5:00 PM) on November 14, 2008**. Late proposals will not be accepted. Submit hard copies (printed) of your proposals only, proposals submitted electronically will not be accepted. Three copies of the proposal shall be submitted in writing to:

Reid Thornburg
Provider Relations Manager
PBH Network Operations Department
245 LePhillip Court NE
Concord, NC 28025

Selection Process

The Network Operations and Quality Management Departments will review the applications on **November 17, 2008** and notify the final candidates with the highest review scores of their selection for the 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.

Interviews for the finalists will be conducted on:

Date: **November 20, 2008** Time: **Beginning at 9:30 am** Location: **People Driven Supports (PDS) Building (457 Lake Concord Rd.)**

All finalists will be asked to provide a phone number they can be contacted at no later than 5:00pm on **November 25, 2008** for the purpose of notification of the award for this RFP.

Additional Information

- Letter of Intent must include Agency Name, CEO Name/Title, Contact info, Address, Phone, email address and stated intent to bid for service(s)
- Mandatory Bidders Conference is a venue to address questions, concerns, and obtain other details regarding MR/MI Residential Program and this RFP process.
- Provider Requirements...
 - To be considered for the RFP a Provider must meet the following requirements as noted in the RFP;
 - Be a **contracted PBH provider** in good standing with PBH or have the current capacity to meet eligibility requirements to become an endorsed provider with PBH and be able to provide services to all eligible individuals in the PBH catchment area; and
 - Not have any type A or pending sanctions with DMH/DD/SA; 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
- Exclusionary Criteria...
 - PBH reserves the right to refuse award of contract in the event that none of the applicants demonstrate adequate assurance of their ability to successfully implement and maintain the service(s) provisions
- Format of proposal...
 - All proposals/applications shall be submitted no later than the due date to PBH in the following format:
 - **Three (3) separate copies of completed applications, each bound in a separate, tabbed, appropriately sized standard hard-cover three-ring binder**
 - **Tabbed and ordered following PBH application outline**
 - **Include a Table of Contents**
 - **Include any referenced Appendices (same or additional binder, formatted and tabbed)**
 - **No electronic submissions accepted**
 - **Any missing or omitted information may delay or exclude an agency from further selection**
- Disposition of proposal...
 - Proposals shall be reviewed and scored by a multi-departmental team consisting of at minimum, both Network Operations and Quality Management
 - Other community stakeholders or entities may be included in this process as deemed necessary
 - Conflict of Interest will be avoided when determining the review team composition
 - PBH's Network Operations Cross Functional Team shall review the results of the scoring and recommendations of the Review and Interview teams and make the final determination of the award of the RFP.
 - All applicants will be notified regarding disposition, by phone or mail
- Review process...
 - Any missing or omitted information may delay or exclude an agency from further selection
 - Proposal review and scoring process will result in determining an Agency's selection and invitation to the Community Review Interview

- Preparation expense...
 - Any and all costs incurred by applicants in preparing or submitting proposals are the sole responsibility of the applicant
 - Disclaimer...
 - All the information contained within this RFP/RFP and its attachments reflect the best and most accurate information available to PBH at the time of preparation.
 - No inaccuracies in such information shall constitute a basis for legal recovery of damages, either real or punitive.
 - If it becomes necessary to revise any part of this RFP, a supplement or revised document will be issued.
 - Freedom of Information...
 - All information contained within an applicant's proposal is subject to the provisions of the Freedom of Information Act.
 - Applicants who claim a statutory exception to the Act must place all confidential documents in a sealed envelope clearly marked "CONFIDENTIAL", and must indicate that confidential materials are included in the general application package.
 - Applicant must reference which statutory provision of confidentiality applies.
 - PBH reserves the right to make final determinations regarding confidentiality.
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**For more information or general inquiries contact:
Reid Thornburg @ 704-721-7107 or via email at reidt@pamh.com**

PBH Request for Proposal Application
Residential Program for MR/MI Persons

Name of Agency:		Date:
Street Address:	Mailing Address:	Email address:
City:	State: Zip:	Business Telephone/ FAX Number () ()
County:		
Contact Person and Contact Information:		CEO/Owner:

Please describe in detail your Agency’s plan and activities to implement the MR/MI Residential Program service. It is important that providers base their response on financial feasibility, knowledge of community resources, and experience operating services for persons with MR/MI disability. Answers should be specific and detailed. The answers should outline your Agency’s interpretation of the service and how you intend to provide the service on a day-to-day basis. Information to be documented includes:

1. Experience of your Agency with the identified target population to be served within the service;
 1. Specifically describe the services that you provide to individuals with co-occurring disorders.
 2. Has your agency had any type A violations in the past 5 years, type B violations or pending sanctions with DHSR.
 3. Is your agency currently being investigated for Medicaid fraud or have a judgment against it involving Medicaid fraud during the past five (5) years?

2. Application, Screening, and selection process for prospective participants to receive the service;
 1. Please describe this in detail
 2. How will consumers/families receive applications and who do they return them to?
 3. Who will do the screening?
 4. Who will make up the selection committee?
 5. What criteria will the committee use to decide the appropriateness of a consumer for receiving the service?
 6. How will consumers/families be notified of the selection committee’s decision?

- d. Admission criteria (should be operational in nature);
- e. Discharge criteria (should be operational in nature);
- f. Follow Up Processes and Procedures Post Discharge;
- g. Please include the proposed job descriptions of the staff for the service.
- h. Minimum qualifications of staff for the Program at your Agency
 - 1. Staff currently employed by your agency
 - 2. Please include your proposed thoughts on the education, experience and competence level that your Agency would feel necessary to support individuals receiving the service.
 - 3. Supervision and Ongoing Training plan for the staff.
 - 4. Proposed staffing schedule.
 - 5. Proposed On-call schedule
- i. Include an Organizational Chart. The organizational chart should specifically outline Program lines of clinical and administrative supervision.
- j. Include on call supervisory support systems to include specific Clinical and Medical Coverage;
- k. Sample of documentation that is required for the service definition (Include Crisis Plan, Strength Based Assessment, Person Centered Plan, service notes. In addition, please note what documentation will be utilized to assess the need for/develop the Crisis Plan. Will you use any form of risk assessment?)
- l. Include information related to your Agency's incorporation of person centered, strength based and evidence based approaches to service delivery and recovery philosophies within your program. Please include specific examples of how this is demonstrated on a day-to-day basis.
- m. In cases of a natural disaster, manmade disaster, or inclement weather how will you ensure service continuation.
- n. Please submit a proposed operational budget.
- o. Please submit a proposal for completion of policy and procedures that contains timelines for completion.
- p. Please submit your agency's QA/QI plan (globally and specific to this program) to include provisions for consumer satisfaction surveys and utilization of services.