Contra Costa Behavioral Health Services
Request for Proposals (RFP)
Outpatient Mental Health Services
September 30, 2015

I. General Instructions

Contra Costa Behavioral Health Services (CCBHS, or the County) is seeking proposals from suitably qualified community-based providers and organizations to design and implement outpatient mental health services for consumers currently being served by an existing mental health provider. Consumers are eligible adult clients who reside in West Contra Costa County. The selected provider’s program site is to be located in West Contra Costa County. Applicants responding to this Request for Proposals (RFP) will provide their qualifications, a description of their proposed program, timeline for implementation, and budget. This RFP covers the last 6-months of fiscal year 2015-16 (the transition period of January 1, 2016, through June 30, 2016) and all of fiscal year 2016-2017 (July 1, 2016, through June 30, 2017). The total amount available to provide services for this period is not to exceed $2,017,800; however, we request that applicants submit two separate budgets: one for the period January 1, 2016, through June 30, 2016, not to exceed $672,600 and one for the period July 1, 2016, through June 30, 2017, not to exceed $1,345,200. While payment will be made for allowable costs that are actually incurred, the provider will be required to apply for Medi-Cal certification and bill Medi-Cal using the County’s Medi-Cal billing system (PSP/Insyst). All federal financial participation payments shall accrue to the County.

The successful applicant will be transitioning consumers who are receiving mental health services from an existing provider into the services detailed in this RFP. These existing services include outpatient mental health services, and other services and/or activities determined appropriate by the applicant. Applicants are to detail in their program narrative a plan for successfully transitioning consumers who are receiving services from the existing provider.

The proposal must demonstrate that the provider administers services for adults and older adults who have a serious mental disorder as defined under the Welfare & Institutions Code §5600.3(b). Any contracts awarded will be based upon the quality of the proposals, organizational capacity of the applicants, and availability of funds. Depending on the number and qualifications of RFP applicants, CCBHS may, after receiving approval from the Behavioral Health Services Director, move directly to a contract negotiation phase with the selected applicant.

I (A). Format, Delivery and Due Date

This RFP and all related forms and materials are available on the CCBHS website at http://cchealth.org/bhs. Please provide one electronic copy on CD, a signed original PLUS five (5) additional hard copies of your proposal. Each hard copy must be clipped or stapled in the upper left corner (only) and clearly marked with the name and address of the lead agency. Additional specifications:

- Written in Times New Roman size 12 font
- Margins 1” on all sides
• Single-spaced pages
• All pages consecutively numbered
• Proposal follows the outline presented below
• Original and copies printed on three-hole punched paper
• 35-page text limit for Narrative

Proposals should be delivered to the following:

Matthew Luu, Deputy Director
Contra Costa Behavioral Health Administration
1340 Arnold Drive, Suite 200
Martinez, CA  94553
Phone: 925-957-5150

A single, packaged set of all proposals and electronic submissions are due at the above address by **5pm on Monday, November 9, 2015**. Postmarks on this date will not be accepted. Late proposals will not be accepted and will not be reviewed. There will be no exceptions. No faxes or electronic submissions will be allowed.

In the order presented, submissions should include the following:

1) Cover Page (see attached)
2) A program narrative (**20-page maximum**) that describes the provider’s service delivery model, a timeline for implementing the services during the transition period (January 1, 2016, through June 30, 2016), and the indicators used to measure the effectiveness of the agency’s model and program outcomes. The narrative should also describe how the applicant will: 1) successfully transition existing consumers to the new services, 2) provide needed support services, 3) make and follow-up on referrals to community resources, and 4) work as a team with all parties, including consumers, family members, service resources, and the community. Include any applicable policies and procedures.
3) Budgets and budget justifications (**5-page maximum**) for the periods January 1, 2016, through June 30, 2016, and from July 1, 2016 through June 30, 2017. The budgets should outline the expected cost of transitioning and delivering the services and supports, delineated by the major cost categories of 1) personnel salaries and benefits, 2) operating costs, and 3) administrative costs required to support the program. Indirect costs should not exceed 15% of the total budget. Budget line items should include a justification narrative, and should be linked to the program narrative. The budget should also provide a list of any additional funds, including amounts and sources, which will be leveraged to support program operations.
4) Details of the applicant who will be developing and implementing the work plan (**10-page maximum**). Please describe the applicant’s qualifications relating to the requirements described herein. Describe any successful experience, if any, with outpatient mental health and relevant ancillary services. If the applicant is an agency, please include a corporate profile, along with the resume(s) of staff proposed to implement and evaluate the work plan.
5) Appendices should include the detailed resumes of all program staff (or job descriptions if staff have not been identified yet) and copies of applicable policies and procedures.

I (B). **Mandatory Applicant Conference**

All interested agencies or community-based providers must participate in a **MANDATORY Applicants’ Conference** on **Wednesday, October 14, 2015 from 10:00am to 11:30am**. Those planning to participate in the conference should **RSVP no later than 5 pm on Monday, October 12, 2015** to Lisa.Cabral@hsd.cccounty.us. The conference will be located at:
Those wishing to participate by conference call should state their intentions in their email RSVP. The call-in number and participant code will be provided prior to the mandatory applicants’ conference.

I (C). Rules and Considerations

- The cost of developing and submitting a proposal in response to this RFP is the responsibility of the applicants and will not be reimbursed through any contracts resulting from this RFP process or from any other County funds.
- CCBHS may issue an RFP amendment to provide additional data required and make changes or corrections. The amendment will be sent to each applicant who attended the mandatory Applicants’ Conference. CCBHS may extend the RFP submission date if necessary to allow applicants additional time to consider such information and submit required data.
- The RFP may be cancelled in writing by CCBHS prior to award if the Board of Supervisors determines cancellation is in the best interest of the County.
- The RFP and any contract resulting from this process may be cancelled by the Board of Supervisors with a 30-day notice any time funding is unavailable.
- Contracts awarded as a result of this RFP are subject to pending appeals by other applicants. The award is subject to cancellation or modification by CCBHS in accordance with the resolution of any such appeal.
- Contractor will be required to participate, through the County, in state-mandated surveys and data collection efforts.
- Selected contractor must adhere to Contra Costa County’s contracting process, providing all information as requested by CCBHS. The selected contractor will also be informed of the County’s insurance coverage requirements, where applicable, and the process for contract approval, where applicable, by the Board of Supervisors.

I (D). Additional Information

This RFP and all forms and materials for submitting a proposal are available on the CCBHS website at: http://cchealth.org/bhs/.

CCBHS recognizes additional questions may arise after the Applicants’ Conference, however, due to the abbreviated timeline of this RFP, no questions will be accepted after the mandatory bidder’s conference. All questions and answers from the bidders conference will be disseminated via email to all submitters as well as posted electronically to the BHS website (see schedule outlined in Section V). The final date questions and answers will be posted is Wednesday, October 21, 2015.

All RFP submissions will be reviewed promptly and the goal is to announce either a selection or next steps by 5:00 p.m. on Friday, November 20, 2015.

Applicants who are not selected may appeal CCBHS’s selection of awardee(s) within three (3) days of notification. Appeals must be addressed to the Director of Behavioral Health. Appeals must be in writing and shall be limited to the following grounds:

- The County failed to follow the RFP procedures, which affected the proposal scoring; and/or
- The RFP evaluation criteria were not appropriately applied to the proposal.
The Director of Behavioral Health will respond to the appeal within two (2) days and the decision of the Behavioral Health Director will be final and not subject to further review.

II. Introduction

II (A). About Behavioral Health Services – A Division of Contra Costa Health Services

Behavioral Health Services Division of Contra Costa Health Services combines Mental Health Services, Alcohol & Other Drugs Services and Homeless Services into a single system of care. With increasing challenges in serving complex populations with multiple needs, this integration is a response to the growing desire to have improved consumer outcomes through a systems approach that emphasizes "any door is the right door," and that provides enhanced coordination and collaboration when caring for the "whole" individual.

The mission of Contra Costa Behavioral Health, in partnership with consumers, families, staff, and community-based agencies, is to provide welcoming, integrated services for mental health, substance abuse, homelessness and other needs that promote wellness, recovery, and resiliency while respecting the complexity and diversity of the people we serve.

Mental Health Services

Mental Health Services provides care to children, transition age youth, adults, and older adults living in Contra Costa County. These services are provided through a system of care that includes county owned and operated clinics, community-based organizations, and a network of private providers.

Contra Costa children and adolescents are served by a County-wide system of care that includes mental health staff working in partnership with the Probation Department, Employment and Human Services Department, School Districts, and family members. Services for adults are provided to those with serious mental disabilities or those in acute crisis. Mental Health Services also includes a range of prevention programs oriented toward prevention of more serious mental health issues. The Contra Costa Mental Health Plan is the mental health care provider for Medi-Cal beneficiaries and the uninsured.

Alcohol and Other Drug Services

The Alcohol and Other Drugs Services (AODS) "puts people first". The mission of AODS is to advocate for alcohol and drug free communities by promoting individual and family responsibility, hope, and self-sufficiency. The AODS System of Care is a planned, comprehensive approach for providing alcohol and other drug treatment and prevention services in Contra Costa County. The continuum of care benefits consumers and providers by combining administrative and clinical services in an integrated, coordinated system. The goal is to give consumers high-quality yet cost effective care in a timely manner.

Homeless Programs

The Contra Costa County Homeless Program's mission is to ensure an integrated system of care from prevention through intervention for homeless individuals and families within our community. We strive to accomplish this through the development of policies and practices, community involvement, advocacy, and the coordination of services that respect human dignity, strengthen partnerships, and maximize resources.
Contra Costa Health Services Homeless Program has helped to create a system of care that includes:

- Community Homeless Court Program
- Outreach services to encampments
- Information and referral services
- Multi-Service Centers that provide case management and support services
- Emergency shelter
- Transitional housing
- Permanent supportive housing for adults, youth, and families

Services are free of charge to homeless individuals.

II (B). Medical Necessity

CCBHS will contract with a provider or community-based organization that is capable of serving adults who meet medical necessity and are identified as having Serious Mental Disorder according to criteria set forth in the Welfare and Institutions Code §5600.3(b).

§5600.3 (b) (1): Adults and Older Adults who have a serious mental disorder:

(2) For the purposes of this part, “serious mental disorder” means a mental disorder that is severe in degree and persistent in duration, which may cause behavioral functioning which interferes substantially with the primary activities of daily living, and which may result in an inability to maintain stable adjustment and independent functioning without treatment, support, and rehabilitation for a long or indefinite period of time. Serious mental disorders include, but are not limited to, schizophrenia, bipolar disorder, post-traumatic stress disorder, as well as major affective disorders or other severely disabling mental disorders. This section shall not be construed to exclude persons with a serious mental disorder and a diagnosis of substance abuse, developmental disability, or other physical or mental disorder.

(3) Members of this target population shall meet all of the following criteria:

(A) The person has a mental disorder as identified in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders, other than a substance use disorder or developmental disorder or acquired traumatic brain injury pursuant to subdivision (a) of §4354 unless that person also has a serious mental disorder as defined in paragraph (2).

(B)(i) As a result of the mental disorder, the person has substantial functional impairments or symptoms, or a psychiatric history demonstrating that without treatment there is an imminent risk of decompensation to having substantial impairments or symptoms.

(ii) For the purposes of this part, “functional impairment” means being substantially impaired as the result of a mental disorder in independent living, social relationships, vocational skills, or physical condition.

(C) As a result of a mental functional impairment and circumstances, the person is likely to become so disabled as to require public assistance, social services, or entitlements.

II (C). Additional Criteria

In addition to meeting medical necessity described above of being diagnosed with a serious mental illness, adults receiving services must meet the following criteria:

1) Current resident of Contra Costa County
2) At least 18 years old
3) Receiving Medi-Cal
II (D). About the Current Community-based Provider

The current outpatient mental health provider in West Contra Costa County is Rubicon Programs, Incorporated. Since 1973, Rubicon Programs has provided employment, housing, mental health, and other supportive services to individuals who are very low-income, especially people who are homeless or experience mental illness. Rubicon’s current mental health and wellness program maintains a caseload of 90-120 consumers and provides case management and coaching, wellness groups and classes, individual counseling, money management, housing placement and supports, and recreational activities. Rubicon will not be providing mental health services after June 30, 2016 and would prefer to have consumers fully transitioned to the selected applicant before this date. CCBHS is utilizing the RFP process to re-allocate the funding for outpatient mental health services under the RFP guidelines contained herein.

III. RFP Guidelines

CCBHS continues to support an ongoing community program planning process that partners program and funding decisions with input from stakeholders. Consumer needs are matched with mental health services and supports in order to continually improve the relevance and efficacy of services. CCBHS is seeking to improve current service delivery by providing effective, high quality integrated mental health care at a variety of levels that can meet the needs of the residents of Contra Costa County. This RFP process seeks proposals that continue this successful tradition, which leads to success in recovery, wellness, and resiliency.

III (A). Cover Page

Please complete the attached cover page (see attachment on final page of RFP) and submit with RFP.

III (B). Program Narrative (20 page maximum excluding appendices, 50 points total)

1) Describe the operational and service delivery program and the expected outcomes. Describe how this program will support individuals to further their mental health recovery. Note, supports and services can be provided by other agencies but the Program Narrative should describe the process(es) for referral and connection to these services and supports around these issues. Include a description of the following:

   a. Describe how consumers of the existing outpatient mental health provider are transitioned into the new program and service delivery, including a proposed timeline for successfully transitioning consumers. (15 points)

   b. Describe the mental health and ancillary services that will be provided. Include how staff will work in concert with County staff to provide outreach and engagement services, as well as how the provider plans to ensure that adults transition to lower levels of care. Include a description of any evidence-based practices/programs that will be utilized, such as Wellness Recovery Action Plan (WRAP) and Motivational Interviewing (MI), and why these practices were chosen. Please describe experience, if any, in utilizing these practices. (15 points)

   c. Describe program staffing and each staff member’s role and/or function in the program. Include the full-time equivalency (FTE) for each staff member assigned to the project. In the appendices, include the job descriptions for each staff position and/or the resume(s) of
staff proposed to be employed in the program. Please specify any professional licenses or language capacity requirements for staff. Include a description of any additional training that will be provided to program staff, such as training in cultural competency. (5 points)

d. Peer and family services are vital for creating a recovery-oriented program. Respondents should construct the peer and family support component in such a way as to allow the provider to bill Medi-Cal for the services. Note, peer providers can be consumers who provide peer support to other consumers and/or family members of consumers who provide peer support to other family members and/or families. Describe the role(s) of peer and family providers in offering support to both consumers and their natural supports. Please provide a description of the peer and family provider training(s) that will be utilized. (5 points)

e. Describe how the project will be reviewed and evaluated as well as how the applicant will include the perspectives of the consumers and their family members in the review and evaluation. Provide a brief description of how program outcomes will be measured. As appropriate, include measurement tools. Explain how both qualitative (e.g., interviews, consumer focus groups, etc.) and quantitative (e.g., demographics, assessment scores, etc.) data will be collected in order to capture and document outcomes and impact of service delivery. (5 points)

f. Describe the location where the services will be provided as well as any licensing that will be needed, and timeline, to obtain appropriate licensure and Medi-Cal certification. (5 points)

2) As appendices to the Narrative (not included in page restriction) please supply the following:
   a. Consumer handbook
   b. Consumer outreach protocol
   c. Consumer intake protocol
   d. Consumer crisis protocol (example: psychiatric or physical health emergency)
   e. Protocol for referring consumers to additional services and/or resources as needed
   f. Discharge planning policy
   g. Grievance procedure
   h. Staffing pattern, including qualifications, job descriptions, and resumes
   i. Emergency plan (i.e., evacuation, catastrophic, natural disaster plan)
   j. Staff safety plan

III (C). Budget and Budget Justification (5 page maximum, 15 points total)

Include a line item budget and justification listing the expected cost of implementing the contract project from January through June 2016 with service costs not to exceed $672,600. In addition, include a budget and justification projecting a full contract year for FY16-17 not to exceed $1,345,200. The line item budget should be broken down by the major cost categories of 1) personnel salaries and benefits, 2) operating costs, to include separate line items for office and program space, printing/photocopies, supplies, postage/communications, travel, subcontractor costs, and other costs (please list), and 3) administrative costs (indirect) required to support the program. Indirect costs are not to exceed 15% of the total budget. Budget line items should include a separate justification narrative, and should be linked to the program narrative. The selected provider is expected to generate sufficient Medi-Cal billing to meet the Federal Financial Participation (FFP) obligation included in the contract payment limit ($971,958 in FFP over the 18 month contract period). The budgets should also include a list of any
additional funds that will be leveraged to support program operations. Include source and type of funding.

III (D). Characteristics and Qualifications of Applicant Agency (10 page maximum, 35 points total)

Write a narrative describing the characteristics and qualifications of the applicant agency that will be operating the program and delivering services. Please describe the applicant’s qualifications relating to the requirements described herein. Include a description of the agency’s organizational capacity to serve the target population and provide audited financial statements from the previous fiscal year, as appendices. If the applicant agency utilizes a fiscal agent, please provide a corporate profile of the fiscal agent, a letter of support, and audited financial statements from the previous fiscal year as appendices.

- Eligible applicants may include but are not limited to, community-based agencies, faith-based organizations, and for-profit agencies. Please provide the agencies’ Tax Identification Number (TIN) or Employer Identification Number (EIN), if applicable.

- Applicants must demonstrate a history working with individuals experiencing serious mental health illnesses, as well as demonstrating recognition and support from key stakeholder entities, such as organizations representing the interests of consumers and family members.

Please describe:
1) Successful experience serving individuals experiencing moderate to severe mental health challenges, or demonstrate the potential to do so. (5 points)

1) Experience in working with key consumer support systems; e.g., families, peers, other natural supports, communities, service agencies, and providers. (5 points)

2) Successful experience in working with co-occurring disorders, such as physical and developmental disabilities, and alcohol and other drug abuse disorders. (5 points)

4) Successful experience in ensuring consumers are referred and connected to appropriate health, mental health, and other social service resources, and have a referral system or broad network of resources to connect individuals with necessary services and treatment. (5 points)

5) The ability to work successfully in racially/ethnically diverse settings and/or to collaborate with agencies with such experience; bilingual service capacity is desired. Have the ability to work successfully with individuals of diverse sexual orientations and gender identities, and/or to collaborate with agencies with such experience. (5 points)

6) Knowledge of and experience in obtaining Medi-Cal site certification. (5 points)

7) Experience in designing, implementing, and reporting a data-based assessment and evaluation component that communicates outcomes and program impact. CCBHS is looking for an applicant who can work collaboratively with the County to provide regular data so as to enable analysis and evaluation of the efficacy of provided services. (5 points)
IV. Method of Evaluation

IV (A). Initial Screening

Proposals will be screened for compliance, completeness and eligibility as they are received. In order to receive a score, each proposal must meet all of the following criteria. A failure to meet any one of these criteria is subject to the proposal being disqualified. DISQUALIFIED SUBMISSIONS WILL NOT BE SCORED AND WILL NOT BE FURTHER CONSIDERED FOR THIS CONTRACT.

1) Proposal was received by due date.
2) All sections of Proposals as outlined in RFP are included and within page limits (excluding Appendices).
3) Appendices are included and are complete.

IV (B). Scoring of Proposal

A panel of RFP reviewers will score each proposal. A maximum of 100 points for each proposal is possible using the following scoring:

1) Program Narrative 50 Points
2) Budget 15 Points
3) Applicant Qualifications 35 Points

In order to be considered for an award, the proposal must have a minimum score of 75 points. Based on overall scores, RFP reviewers will recommend to the Health Services Department selection of the agency/agencies/awardee(s) to potentially fund to develop and operate an outpatient mental health treatment program. Funding for program implementation will be contingent upon review approval from the Behavioral Health Director.

V. RFP Schedule of Important Due Dates

<table>
<thead>
<tr>
<th>Important Dates</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Request for Proposals – Posted Online</td>
<td>Wednesday, September 30, 2015</td>
</tr>
<tr>
<td>RSVP Deadline for attendance to MANDATORY applicant Conference</td>
<td>Monday, October 12, 2015</td>
</tr>
<tr>
<td>Applicant Conference (1340 Arnold Drive, Large Conference Room located in Suite 200, Martinez, CA 94553)</td>
<td>Wednesday, October 14, 2015</td>
</tr>
<tr>
<td>Final set of responses to questions submitted by applicants at conference</td>
<td>Wednesday, October 21, 2015</td>
</tr>
<tr>
<td>RFP Application Due Date</td>
<td>Monday, November 9, 2015</td>
</tr>
<tr>
<td>Awardee Announcement</td>
<td>Friday, November 20, 2015</td>
</tr>
</tbody>
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Outpatient Mental Health Services: Proposal

Project Name: ____________________________________________

Cover Page

Name of Applicant or Agency: ____________________________________________
Address: ____________________________________________
Contact Name: ____________________________________________
Title of Contact Person: ____________________________________________
Contact Phone/Email: ________________ ________________

Total Amount of Request: ________________

Applicant Agency Signature:

This signature assures commitment to participate in this program if selected.

________________________________________  ____________________________________________
Executive Director  Type Name Here

________________________________________  ____________________________________________
Board President  Type Name Here