

**ST. MARY'S COUNTY HEALTH DEPARTMENT
LOCAL BEHAVIORAL HEALTH AUTHORITY – LBHA
BEHAVIORAL HEALTH ASSISTED LIVING FACILITY PROGRAM PILOT
GRANT REQUEST FOR PROPOSALS (RFP)
FISCAL YEAR 2023
SMCHD RFP 23-19**

OVERVIEW

The St. Mary's County Health Department Local Behavioral Health Authority (SMCHD LBHA) is issuing this RFP 23-19 to develop a behavioral health pilot program model within FY23 to support 4-6 adults living with serious mental illness (SMI) in St. Mary's, Calvert and/or Charles County. The Awardee will provide services utilizing a grant award of up to \$175,000.00. Preference will be given to facilities that are not co-located with substance abuse treatment services.

ELIGIBILITY REQUIREMENTS

To apply for this RFP, an organization must:

- The Bidder shall have a current license through the Maryland Office of Health Care Quality (OHCQ) under COMAR 10.07.14 to operate in St. Mary's County, Charles and Calvert. As proof of meeting this requirement, the Bidder shall provide with its Bid a copy of the license with the current address.
- The Bidder shall meet the Centers for Medicare & Medicaid Services (CMS) Home and Community Based Services (HCBS) Setting Rules. As proof of meeting this requirement, the Bidder shall provide with its bid, verification from CMS. Bidder's that do not currently meet the CMS HCBS Setting Rules shall provide a detailed plan and timeline for coming into compliance with the Setting Rules.

GRANT PROGRAM EMPHASIS

This RFP is designed to develop a behavioral health assisted living pilot program to support adults living with serious mental illness.

For more information contact:

Tammy Loewe, Behavioral Health Division Director
Local Behavioral Health Authority (LBHA)
St. Mary's County Health Department
21580 Peabody Street, PO Box 316
Leonardtown, Maryland 20650
Tammym.loewe@maryland.gov
301-475-4330 Main Number

PROGRAM BACKGROUND AND INFORMATION

SMCHD LBHA is issuing this solicitation for the purposes of contracting with licensed Assisted Living Facilities (ALF) to provide a Behavioral Health Assisted Living Program that can provide services for 4 to 6 adults living with SMI in St. Mary's County or the surrounding counties (Charles and Calvert). With the assistance of the SMCHD, the Contractor will develop the program and operate a model that delivers services for 4 to 6 adults with SMI.

The Behavioral Health Administration (BHA) has moved to decentralize the management of behavioral health services to Maryland Medicaid recipients and eligible uninsured residents by developing Local Behavioral Health Authorities, Core Service Agencies, and Local Addictions Authorities. The Local Behavioral Health Authority (LBHA) is acting as the designee of the Maryland Department of Health (hereafter known as "the Department"), shall complete a competitive procurement for its respective jurisdiction for all grant-funded activities. The St. Mary's County Health Department, Behavioral Health Division, LBHA is responsible for planning and systems management of the Public Behavioral Health Systems for the residents of St. Mary's County.

Resources for adults with behavioral health conditions are sparse within Maryland. Public Behavioral Health System utilization data indicates that adults are underrepresented among those served considering the percentage of Medicaid recipients who are over age 65. Hospitals report extended stays for this population, which has been further exacerbated by the COVID-19 pandemic. The rates of suicide and overdose among this population continues to increase. Healthcare for the Homeless reports an increase in adults experiencing homelessness for the first time in their lives.

There are few community options that provide an alternative to nursing facility services for adults with behavioral health conditions who require assistance with activities of daily living and or have medical conditions that require nursing assessment and delegation. Maryland's long-term services and support lack behavioral health expertise and Maryland public behavioral health system lacks services that are accessible and or meet the needs of adults. An assisted living service with behavioral health wrap-around services is needed to support this population and prevent unnecessary institutionalization.

Services should be provided for persons who:

- Have a diagnosis of serious mental illness
- Need for assistance with ADLs or other somatic problems requiring nurse supervision
- Income less than 3 times SSI and assets less than \$2,000
- Are at risk of admission to state psychiatric hospital or discharging from state psychiatric hospital
- Have a Level I PASRR screen completed.

To Apply, the organization or service provider must:

- Meet the eligibility requirements listed in this document.
- Attend the Pre-Application Meeting
- Submit an application (Attachment 1)
- Designate one person (Program Director) to be the liaison with SMCHD LBHA to provide information for grant reporting and evaluating the services provided.
- Commit to meet with the SMCHD LBHA on a biweekly schedule from the date of grant award to provide updates on project progress. Schedule may be modified based on performance
- Demonstrate program sustainability beyond the life of this grant

PROGRAM REQUIREMENTS

All provider proposals for funding must be reviewed and approved by the Local Behavioral Health Authority (LBHA). Providers selected must meet the eligibility criteria described below to be considered for funding. Funds are to be used to pay for Assisted Living Facility (ALF) services for at least 4 and a maximum of 6 individuals with behavioral health conditions referred by the LBHA throughout the award period.

Proposals shall be aligned with the goals of the Behavioral Health Administration and the Behavioral Health Administration, as identified below:

Overall Goal

To Develop a behavioral health pilot program model within FY23 to support adult individuals living with serious mental illness (SMI) in the community.

- Contract with one licensed ALF that meets, or will meet by the end of fiscal year, the home and community based setting rule.
- Serve 4-6 individuals with SMI in the program by June 2023
- Provide quarterly care coordination visits to individuals served in the program and assists ALF with coordinating behavioral health wrap around services.
- Provide ALF with behavioral health training and technical assistance to support individuals with SMI
- Reduce psychiatric and nursing facility admission for individuals served

Facility Requirements and Provider Services

The Contractor shall:

1. Possess and maintain a license through the Maryland Office of Health Care Quality (OHCQ) under COMAR 10.07.14.
2. Meet the Centers for Medicare & Medicaid Services (CMS) Home and Community-Based Services (HCBS) Setting Rules.
3. Provide a plan for all admissions. SMCHD LBHA will approve all admissions to the program funded through this grant. The admission (medical necessity) criteria include:
 - a. Need for assistance with ADLs or other somatic problems requiring nurse supervision
 - b. A diagnosis of serious mental illness
 - c. Income less than 3 times SSI and assets less than \$2,000
 - d. Being at risk of admission to state psychiatric hospital or discharging from state psychiatric hospital
 - e. Having a Level I PASRR screen completed.
4. Have an adequate disaster and relocation plan for the site(s). The Contractor shall provide a copy of their disaster and relocation plan. Screen residents for fall risk, depression, anxiety, and substance use disorder. The Contractor shall provide a copy of the assessment used to screen residents.
5. Assure that all individuals served through the program apply for all eligible Medicaid benefits including registry for Community Options Waiver and that individuals served contribute a portion of their SSI/SSDI income toward the cost of care. Individuals shall receive \$100.00 for incidentals from their SSD/SSDI income. The Contractor shall provide a copy of the policy on entitlements.
6. Act as the representative payee to those individuals who do not have a representative payee. For those who do have a representative payee, the ALF will coordinate with the

payee to ensure that the associated cost of care is paid. The Contractor shall provide a copy of the policy on representative payees.

7. Ensure individuals served through this program receive medical care as needed to include but not limited to general medical care and psychiatric/mental health care; the ALF must have a staff member accompany the individual to their appointments and provide transportation. Documentation showing appointment accompaniment occurred may be required. The Contractor shall provide a copy of the policy on patient transportation and accompaniment.
8. Work with the SMCHD LBHA to coordinate outpatient behavioral health services and/or mobile treatment services for individuals residing in the ALF.
9. Work with the SMCHD LBHA to coordinate behavioral health wellness resources (e.g., 12 step programs, peer supports, WRAP class) Integration of behavioral health wellness resources (e.g., 12 step programs, peer support, Wellness Recovery Action Planning (WRAP) classes and programming encouraging healthy coping skills.
10. Have a discharge notification process that includes notification to both the resident and the SMCHD LBHA at least 30-days in advance and ensures safe discharge plan. The Contractor shall provide a copy of the discharge policy and the template for discharge planning.
11. Agree to SMCHD LBHA performing audits as needed, annually at minimum, of the ALF to ensure their license is current and that they are compliant with all contractual obligations listed below:
 - a. the designated site has a current fire inspection;
 - b. the designated site complies with the Federal Home and Community Based Setting Rule;
 - c. the ALF has an adequate disaster/ relocation plan;
 - d. the ALF screens residents for risk of falls, depression, anxiety, and substance misuse;
 - e. the ALF has a discharge notification process that includes notification to the resident and the CSA at least 30 days in advance and ensures a safe discharge plan;
 - h. ALF staff working with individuals served through this grant must ensure staff are trained to understand behavioral health conditions in adults, de-escalation techniques, person centered practices, behavioral health supports and resources. Mental Health first Aid for adults training, or similar curriculum, is recommended.
 - i. The ALF will coordinate and comply with any Community Forensic Aftercare Program reporting requirements for individuals on Conditional Release.
 - j. Assure that all individuals served through the program apply for all eligible Medicaid benefits including registry for Community Options Waiver and that individuals served contribute a portion of their SSI/SSDI income toward the cost of care. Individuals shall receive \$100.00 for incidentals from their SSD/SSDI income.

- k. The program will be the representative payee to those individuals who do not have a representative payee. For those who do have a representative payee, the ALF will coordinate with the payee to ensure that the associated cost of care is paid.
- l. Individuals served through this program are receiving necessary medical and psychiatric care to include transportation and accompaniment of an ALF staff member.

Staffing Requirements

The Contractor shall:

- 1. Employ staff trained to understand behavioral health conditions in adults, de-escalation techniques, person centered practices, behavioral health supports and resources. Mental Health First Aid for adults training, or similar curriculum, is recommended. Complete a minimum of one mental health training annually for staff. The Contractor shall provide a copy of the training plan.
- 2. Ensure that staff have required training/certifications and adequate behavioral health training. Contractor shall provide a copy of staff certifications/licenses.
- 3. Conduct background checks on all staff and care providers.

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DATA AND REPORTING

The Awardee will make any/all documents and records available for audit/evaluation to entitled Federal, State and County officials upon request. SMCHD LBHA will establish and conduct regular program monitoring site visits and record reviews that will include assessing compliance with all Federal, State, and Local conditions of award, health and safety reviews, fiscal and data information, and quality management of service processes. Program and Fiscal Reviews will occur at least biannually.

The Awardee will collect data and create and provide a quarterly report to be submitted by close of business on the 15th day of the month following the close of the reporting period to the SMCHD LBHA .

<u>Reporting Period</u>	<u>Report Due Date</u>
July 1, 2022 - September 30, 2022	October 15, 2022
October 1, 2022 - December 31, 2022	January 15, 2023
January 1, 2023 - March 30, 2023	April 15, 2023
April 1, 2023 - June 30, 2023	July 15, 2023

SMCHD LBHA reserves the right to adjust and change data reporting requirements as the project evolves and/or as MDH guidelines dictate.

INVOICING

Invoices for work, services and items not on the project timeline and/or not approved by the SMCHD LBHA may result in denial of further funding. Awardee must provide receipts and/or other documentation of expenditures. Receipts and proof of payment will be required for reimbursement.

Invoices are to be submitted monthly or quarterly as agreed upon in the grant agreement (referenced below) by the 15th of the month following the end of the invoicing period to:

Tammy M. Loewe, Behavioral Health Division Director

tammym.loewe@maryland.gov

With a copy to:

Stacy Del Vecchio, Grant Specialist; stacy.delvecchio@maryland.gov

And

Cheryl L. Thomas, Agency Budget Specialist; cheryll.thomas@maryland.gov

GRANT AGREEMENT

The Awardee shall enter into a Grant Agreement with the SMCHD Behavioral Health Division.

Grant Auditing/Monitoring

Grant auditing/monitoring ensures compliance with applicable regulations, laws, and grant requirements. Sub-recipient agrees as per State of Maryland Department of Health Local Health Department Funding Systems Manual section 2180.04 to be audited by the MDH Chief, Audit Division or by the St. Mary's County Health Department Fiscal Chief at least once annually. Staff will conduct monitoring on an ongoing basis. Monitors may examine but not limited to: the review of monthly and/or quarterly reports as required to include financial reports, chart audits, organization operations, policies and procedures, internal and management controls, complaints, grant subaward-related activities and expenditures, and site visits.

Termination for Non-Performance

Any Grant Agreement resulting from this RFP may be terminated by either SMCHD Behavioral Health Division or the Awardee by giving thirty (30) days written notice to the other party.

If the Awardee shall fail to fulfill in a timely and proper manner its obligations under the Grant Agreement, or if the Awardee shall violate any terms of the Grant Agreement, within the sole discretion of the SMCHD Behavioral Health Division, the SMCHD Behavioral Health Division may immediately terminate the Grant Agreement by giving written notice to the Awardee.

APPLICATION DEADLINE AND SUBMISSION

Applications for the Behavioral Health Assisted Living Pilot Program must be submitted by **4:30 PM on June 10, 2022**.

Submit via email, one copy of the cover page, application narrative, and any applicable supporting documents with the subject line "**Response to RFP # 23-19**" to Tammy Loewe, tammym.loewe@maryland.gov.

Applications received after **4:30 PM on June 10, 2022** will not be considered for review. Faxed applications will not be accepted.

PRE-APPLICATION MEETING

A pre-application meeting will be held via Google Meet on May 27, 2022 from 12:30-1:30PM. To register for the pre-application meeting, email stacy.delvecchio@maryland.gov with the subject line "**RSVP Pre-Application Meeting RFP 23-19**" by May 26, 2022. In the body of the email, please include the following information for all attendees: Full name and title, email, phone, facility/organization Name.

APPLICATION TIMELINE

<u>STEPS TO COMPLETION</u>	<u>COMPLETION DATE</u>
1. Advertise/Email	5/20/2022
2. RSVP DUE for Pre-Application Meeting *See instructions in "Pre-Application" Section	5/26/2022
3. Pre-Application Meeting	5/27/2022; 12:30 PM
4. Application Submission Deadline	6/10/2022; 4:30 PM
5. Review Committee	6/23/2022
6. Letters of Award Disbursed	6/27/2022

REVIEW PROCESS

A panel of reviewers will conduct the application review process using the rating scale below. The decision to award funds of any amount will be final and based on the merits of the application. Applications will be examined for:

Category	Points Possible
1 Problem Description	15
2 Provider Expertise & Organization Capacity	15
3 Administrative Process Description	15
4 Project Description	15
5 Project Timeline	5
6 Sustainability Plan	5
7 Performance & Outcome Indicators	15
8 Budget & Budget Narrative	10
9 Formatting	5
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Total Points Possible:	100

Attachment 1
ST. MARY'S COUNTY DEPARTMENT OF HEALTH
BEHAVIORAL HEALTH ASSISTED LIVING FACILITY PROGRAM PILOT
APPLICATION INSTRUCTIONS

Fiscal Year 2023 Behavioral Health Assisted Living Program Pilot grant applications must not exceed 10 single-spaced pages using 12-point font in Times New Roman. Proposals exceeding the 10-page limit will not be considered. Please use headings that correspond to the evaluation criterion outlined below. The program line item budget/budget narrative and performance measures may be submitted as a separate attachment and will not count towards the 10-page limit. Please provide detailed information in your narrative to address all the elements in the evaluation criteria as listed below:

1. **Problem Description:** Description of the problem extent in the jurisdiction, including service gaps, and document the extent of the need for services for the program's target population(s).
2. **Provider Expertise and Organizational Capacity:** Description of provider expertise and organizational capacity to provide ALF services for adults with serious mental illness:
 - a. Experience working with adults with serious mental illness
 - b. The Bidder shall have a current license through the Maryland Office of Health Care Quality (OHCQ) under COMAR 10.07.14 to operate in St. Mary's, Calvert and/or Charles Co. As proof of meeting this requirement, the Bidder shall provide with its Bid a copy of the license with the current address.
 - c. The Bidder shall meet the Centers for Medicare & Medicaid Services (CMS) Home and Community Based Services (HCBS) Setting Rules. As proof of meeting this requirement, the Bidder shall provide with its bid verification from CMS. Bidder's that do not currently meet the CMS HCBS Setting Rules shall provide a detailed plan and timeline for coming into compliance with the Setting Rules.
3. **Administrative Process:** Description of the administrative process including sub-grantee monitoring of contract deliverables, contracting for recovery residences. Note: if awarded, a copy of the sub grantee contract and MOU agreements must be submitted to r LBHA within 60 days of the award.
4. **Project Description:** Provide a description of what this program will look like at your facility including at minimum:
 - a. Projected number of individuals to be served and level of support
 - b. Eligible functions that will be funded
 - c. How you will support the target population. This shall include a plan to provide necessary ongoing medical and psychiatric care; policies and procedures in the event the individual experiences a crisis; plan for continued staff training; and discuss how the program will reduce behavioral health disparities.
 - d. Description of the expected outcome
 - e. How this program will integrate into current programming and facility structure

5. **Project Timeline:** Clear and concise timeline with descriptions for the implementation of services.
6. **Sustainability Plan:** Provide a plan for sustainability of services beyond the end of the grant award period.
7. **Performance & Outcome Indicators:** Identification of performance and outcome indicators to be used to evaluate the program's effectiveness, including a description of the expected schedule for measuring performance and outcomes. *(may submit as an attachment and does not count towards page count)*
8. **Line Item Budget and Budget Narrative:** *(may submit as an attachment and does not count towards page count)*
 - a. **Line Item Budget** for FY2023 (July 1, 2022 - June 30, 2023) Budget should align with the proposed activities.
 - b. **Budget Narrative** describing the funding needed to support the proposed services.

Additional Documentation (Required): *may submit as an attachment; do not count towards page limit*

- A. Facility License(s)
 - a. Copy of Maryland Office of Health Care Quality (OHCQ) under COMAR 10.07.14
 - b. Verification from Centers for Medicare & Medicaid Services (CMS) Home and Community Based Services (HCBS) Setting Rules
- B. Staff
 - a. Organizational Chart
 - b. Employee licenses/certifications
 - c. Employee background checks
- C. Copy of assessment used to screen residents
- D. Copy of the policy on entitlements
- E. Copy of the policy on representative payees
- F. Copy of the policy on patient transportation and accompaniment.
- G. Copy of the discharge policy and the template for discharge planning

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Attachment 2
ST. MARY'S COUNTY DEPARTMENT OF HEALTH
BEHAVIORAL HEALTH ASSISTED LIVING FACILITY PROGRAM PILOT
GRANT APPLICATION COVER PAGE

Project Title: _____

Organization: _____

Amount of Grant Funds Requested: _____

(Please indicate amount for each year of grant, if applicable)

Address: _____	Email: _____
Address 2: _____	Phone: _____
City, State, Zip _____	Fax: _____
Email: _____	Phone: _____

Contact Person 1: _____	Title: _____
Email: _____	Phone: _____

Contact Person 2: _____	Title: _____
Email: _____	Phone: _____

Is Your Organization Community Based? (Y/N) _____

Does Your Organization have Nonprofit Status? (Y/N) _____

Date of Nonprofit Status: _____ **Federal Identification No.:** _____

I DO SOLEMNLY DECLARE AND AFFIRM THAT THE CONTENTS OF THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Printed Name

Title

Signature

Date

Attachment 3
ST. MARY'S COUNTY DEPARTMENT OF HEALTH
BEHAVIORAL HEALTH ASSISTED LIVING FACILITY PROGRAM PILOT
RFP RATING SHEET

Organization/Facility Name: _____

Category	Possible Points	Score Given
1) Problem Description	15	_____
2) Provider Expertise & Organizational Capacity	15	_____
3) Administrative Process Description	15	_____
4) Project Description	15	_____
5) Project Timeline	5	_____
6) Sustainability Plan	5	_____
7) Performance & Outcome Indicators	15	_____
8) Budget & Budget Narrative	10	_____
9) Formatting	5	_____
Total:		100

Notes

Reviewer Name

Date