

INSTRUCTIONS TO PROPOSERS AND GENERAL CONDITIONS

FY2011

- 1) "Board" as used hereafter shall mean the Lake County Alcohol, Drug Addiction and Mental Health Services Board. "ODADAS" as used hereafter shall mean the Ohio Department of Alcohol and Drug Addiction Services. "ODMH" as used hereafter shall mean the Ohio Department of Mental Health.
- 2) The following material outlines general conditions, instructions and specifications for those who plan to submit proposals to sell services to the Lake County Alcohol, Drug Addiction and Mental Health Services Board. These conditions, instructions and specifications have been developed to serve the following purposes: To provide guidelines for the development, structure, content and submittal of service proposals to the Board; To insure the provision of quality services to consumers in Lake County; To provide a basis for service evaluation, effectiveness and compliance with local, state and federal requirements; To target the limited financial resources of the Board to specific consumer populations as identified by the Board's service plan priorities.
- 3) Each Proposer shall submit two (2) full copies of their Proposal. Each Proposal may be submitted in person or mailed to the offices of the Board at One Victoria Place, Suite 205, Painesville between the hours of 8:00 am and 4:30 pm, Monday through Friday. No Proposal will be accepted after **4:30 pm, Friday, April 23, 2010.**
- 4) All Proposals shall be analyzed and evaluated by the Board during May & June, 2010. Awarding of contracts for State Fiscal Year 2010 will occur no later than the Board's Annual Meeting currently scheduled for **June 21, 2010.**
- 5) In considering Proposals, the Board generally will be guided by the principle of lowest cost and best quality. In evaluating the merits of a Proposal, the Board will consider issues of service quality, costs and outcomes.
- 6) The Board will entertain proposals to realign existing resources to better meet the needs of consumers in the on-going spirit of recovery. Programs emphasizing evidence based practices and provider collaboration will be given priority status.
- 7) A Proposer may submit Proposals for one or more of the services listed on the Proposal Form. The Board will consider each service Proposal separately. The Board may accept and contract for the total amount of services listed by a Proposer on the Proposal Form or for a portion thereof.
- 8) A Proposer must submit one Program Summary (Attachment 1) for each service proposed. A Proposer must provide a complete narrative program description in response to the Service Specifications *ONLY* if there has been a substantial change in the program. If no change has occurred, Provider shall indicate in the narrative that no change in program description has occurred since RFP2010.

- 9) Behavioral health clinical services (pharmacological management, diagnostic assessment, behavioral health counseling, and community psychiatric supportive treatment) shall be billed using the MACSIS billing system and shall be reimbursed based on fee for service. Rates for Medicaid and non-Medicaid services will be set according to the Medicaid ceiling. Non-Medicaid units must be billed via MACSIS by September 30, 2011 for services provided in Fiscal Year 2011.
- 10) Providers billing through the MACSIS billing system will be required to establish a Virtual Privacy Network (VPN) connection through the Board unless prior arrangements are made with Board staff to ensure data is submitted securely and efficiently.
- 11) Should the successful Proposer be a service provider which has not previously been a contractor with the Board, the Proposer shall provide to the Board immediately upon award of and prior to the signing of the contract, the following:
 - a. Articles of Incorporation, By-Laws, Personnel Policies and Employee Grievance Procedures.
 - b. Evidence that the Proposer possess a valid Worker's Compensation Certificate.
 - c. Evidence of insurance coverage including bonding of all persons in the organization who are empowered to receive and disperse funds.
 - d. For a Proposer not previously incorporated, verification of application for incorporation.
 - e. Clients Rights and Grievance Policy and Procedure plan.
- 12) The successful Proposer will be required to execute the contract within ten (10) days after award of the work.
- 13) Failure to comply with any of these instructions may result in rejection of a Proposal or the refusal of the Board to enter into a contract with the successful Proposer.
- 14) The Board reserves the right to reject any and all Proposals.
- 15) A Proposer's meeting will be held on **Wednesday, March 31, 2010 at 1:00 p.m.** in the Conference Room in the Lake County ADAMHS Board offices at One Victoria Place, Suite 205 in Painesville for the purpose of answering any questions Proposers may have. Attendance is not required. Additional meetings may be scheduled as needed.
- 16) These specifications will become part of the final agreement/contract between the Board and the successful Proposers. The Proposer must examine all documents included with this specification and any addenda, and it is understood that all Proposals are based on the Proposer's full comprehension and compliance with stated provisions.

- 17) Laws, Regulations, Rules, Policies and Procedures. Services provided under this proposal and contract shall be in accordance with the following, wherever applicable:
- a. Ohio Revised Code, Chapter 340 et al, and all Ohio Law;
 - b. The Rules, regulations, standards and administrative guidelines of the ODMH and/or ODADAS including but not limited to:
 - i. ODMH certification standard 5122-24 through 5122-29
 - ii. ODADAS standards for Alcohol & Drug Abuse Treatment Programs & Board Assurances (including BH Mod reporting)
 - iii. ODADAS Contract Agency Assurance Statements
 - iv. ODADAS Adult Protocol for Levels of Care
 - c. Federal laws and regulations which are applicable, including those concerning non-discrimination in employment and in the provision of services;
 - d. The Board's Community Plan (mental health and alcohol/drug addiction);
 - e. The Lake County ADAMHS Board Policies and Procedures;
 - f. The requirements of the proposed contract contained in the Exhibits.
 - g. Reporting requirements listed (Attachment 2).

NOTE: Copies of the above documents are available for review upon request from the Board.

- 18) Request for Proposal Format, Instructions and Specifications. Proposers shall follow and include all information and documentation according to the format, conditions and specifications identified and described herein.

- 19) Proposers shall demonstrate how their agency administrative operations and services will address and implement the following components:

- a. Notice of Privacy Practice. Providers shall distribute the Lake County ADAMHS Board Notice of Privacy Practice to all new enrollees in the Lake County MACSIS Program. Notices shall be distributed to new consumers at time of intake.
- b. Client Handbook. Providers shall distribute the Lake County ADAMHS Board Client Handbook to all new consumers in the system. Handbooks shall be distributed at the time of intake.
- c. Administrative Overhead. Proposers shall explain what percentage of their overall budgets will be attributed to administrative overhead, and what makes up their administrative overhead. Administrative Overhead shall be defined as: Personnel and non-personnel costs that benefit the agency as a whole and cannot be allocated to a specific service or services. Proposers shall describe what steps will be taken to reduce the agency's Administrative Overhead in FY10 and beyond.
- d. Staff Retention. Proposer shall provide to the Board the following information regarding the retention of agency staff:

- Turnover rate – specifically, the number of employees who have been hired or have left the organization in the past 12 months;
 - Exit Interview Policy – specifically, how many face-to-face exit interviews have occurred in the past 12 months, who was present during those interviews, and what the organization has learned from them;
 - Outcomes – specifically, what actions has the organization taken as a result of the exit interview findings.
- e. Continuing Education. Proposer shall provide to the Board a plan for adopting an integrated approach to Continuing Education Programs; Proposer shall demonstrate how other Board funded agencies will be invited to participate in Continuing Education Programs offered, in the spirit of cross-training and agency collaboration.
- f. Task Force Strategies Matrix. Previous Proposers provided a plan to address the objectives listed in the Lake County Task Force Strategies Matrix (Attachment 3) including outcome indicators and stressing coordination and linkage of services to other community organizations. Describe the outcome of the organization's efforts over the past year and plans for the new fiscal year. Include formal affiliation agreements your organization has established in Appendix I.
- g. Recovery Concepts and Coordinated Centers of Excellence. Providers will describe how their agencies incorporated the Recovery Concepts and the Coordinated Centers of Excellence Best Practice Models in service provision during the previous fiscal year and plans for the next.

20) Organizational Structure

- a. History. This should be a brief sketch of your organization's history and mission.
- b. Structure. Describe the structure of our organization (e.g. private practice, partnership, incorporated, not for profit, tax exempt, public, for profit). Describe the organization's board structure if it has a board. If it does not have a board, describe any advisory council, committees and/or board that may relate to your operations. If you have a board, include a list of current board members with their current address as Appendix II.
- c. Table of Organization. Include a table of organization of your agency that identifies and describes all units of the organization and their interrelationships, including administration and all program/service categories.
- d. Areas of Expertise. Include a list of the areas of expertise of your staff and/or organization – areas of clinical focus (eating disorders, grief counseling, mr/dd, etc.) and areas of special skill (fluent in Spanish, Russian, American Sign Language, etc.)

21) State Equal Employment Opportunity Regulations. Proposals shall submit documentation that illustrates compliance with State EEO regulations.

- 22) The Provider shall submit to an annual financial compliance audit conducted by an independent auditor who is a certified public accountant as described in the Board/Provider non-Medicaid service contract. A copy of the most recent audit shall be included as Appendix III.
- 23) Fee Schedule. Proposers shall insure that services are available and accessible to persons regardless of financial status. Proposers shall include the organization's fee schedule, consistent with Lake County ADAMHS Board established fee schedule, in Appendix IV. Board Fee Schedule is listed as Attachment 4.
- 24) Certification, Licenses, Affiliation. Proposers should describe relevant certification, licenses and affiliations which they currently hold or are in the process of obtaining. Also, list the organizations' membership in or affiliation with professional associations.
- 25) Insurance. Proposers shall secure such insurance as is necessary to meet the requirements outlined in Article 12 of the Board/Provider non-Medicaid contract. Proposers must provide documentation of current insurance.
- 26) Uniform Cost Report Budget. Each Proposer must complete a Uniform Cost Report budget as required by ODADAS and ODMH and described in Attachment 5. This budget should reflect the proposed budget for the entire agency including each service for which a proposal is being submitted for the entire fiscal year.
- 27) Continuing Quality Improvement.
- a. Proposer shall establish and implement a Quality Improvement Program, as required by the Lake County ADAMHS Board, the Ohio Department of Mental Health and the Ohio Department of Alcohol and Drug Addiction Services. Proposer shall submit a Quality Improvement Plan with accompanying policies, procedures and forms.
 - b. Proposer shall demonstrate compliance with all components of Ohio Department of Mental Health certification standard 5122-28-03 "Performance Improvement".
 - c. Proposer shall demonstrate compliance with all components of Ohio Department of Alcohol and Drug Addiction Services Rule 3793:2-1-04 "Quality Assurance and Improvement".
 - d. Proposer's Quality Improvement Plan shall be congruent with the Board's Quality Improvement Plan (Attachment 6). The Board's Quality Improvement Plan is subject to change, and agencies shall implement any changes necessary in order to maintain congruence with the Board's Quality Improvement Plan. The Board will inform contract service providers of any changes in the Board's Quality improvement Plan and Providers will have sixty (60) days to implement any changes outlined in the Board's Quality Improvement Plan.
 - e. Proposer shall specify a staff member who will be responsible for development, implementation, coordination and oversight of the Quality

Improvement Program. Each agency shall establish and implement a Quality Improvement Committee.

- f. Proposer shall report Quality Improvement activities at least annually to the Board. To ensure that each agency currently under contract with the Board has developed and implemented a Quality Improvement Program, the Evaluation and Quality Improvement Committee of the Board shall review and make recommendations regarding Quality Improvement Plans of contract agencies. Reviews shall be conducted annually for all current contract agencies.
- 28) Special Client Populations. The Board has identified special client populations which are listed in Attachment 7. These special client populations are to be the primary target recipients of Board-funded services. Proposers are advised of the Board's intent to consider services to the special client populations as highest priority. Efforts to target or tailor services to these groups should be described and progress achieved toward last fiscal year's goals reported. Additionally, Proposers should note efforts to target or tailor services to the following populations:
- a. Veterans
 - b. Senior Citizens (age 60+)
 - c. Mentally Retarded/Developmentally Disabled
- 29) Wait Times. All Proposers shall provide current data regarding wait times for access to all board funded services, and shall describe the development and implementation of a wait time management mechanism. Specifically, Proposers shall describe steps taken to reduce/eliminate wait times and enhance service delivery to consumers. Proposers shall include, as appropriate:
- a. Wait time from first contact to schedule intake/diagnostic assessment until actual intake appointment
 - b. Wait time from first contact to schedule first pharmacological management until actual appointment
 - c. Wait time from first contact to schedule first counseling appointment until actual appointment
 - d. Wait time from first contact to schedule first Community Psychiatric Supportive Treatment appointment until actual appointment
 - e. Other
- 30) Capital Planning. All Proposers shall describe what steps they take to insure the capital solvency of their organization – how does the organization provide for its ongoing physical/property needs.
- 31) Physical Operations. All Proposers shall describe what steps they will take to improve the efficiency of the physical operations of the agency.
- 32) Crisis Intervention Service. All Proposers shall have established formal affiliation agreements with other agencies for crisis intervention services if the individual agency does not provide crisis intervention service itself. Proposals may be rejected until such agreements have been developed and effected. Agreement must be dated in current year.

33) Key Contacts. All Proposers shall include a list of names and contact information for key contacts in the agency including but not limited to:

- a. Executive Director
- b. Clinical Director
- c. Business Manager
- d. Quality Improvement Manager
- e. Client Rights Officer
- f. Marketing/Communications Contact
- g. MACSIS Contact

34) Health Officers. Only Lake County ADAMHS Board outpatient, clinical Non-Medicaid Contract Providers will be eligible to submit their employees for consideration for appointment as health officers under ORC 5122.01 and in compliance with Lake County ADAMHS Board Policies and Procedures.

35) Adult Care Facilities. All Proposers shall ensure that all services to individuals residing in Adult Care Facilities (ACF) comply with Ohio Revised Code 5122-31-02. All Proposers shall report to the Lake County ADAMHS Board on a semi-annual basis an aggregate summary of services provided to individuals residing in ACFs.

36) Marketing and Public Relations.

- a. The ADAMHS Board relies on local voter support for funds that make services in our system possible. That vital support is firmly rooted in our collective ability to build and maintain value in the ADAMHS brand. All selected contract service providers share the responsibility to make clear the connection between the ADAMHS Board and agency initiatives and services.
- b. All selected contract service providers shall be provided an ADAMHS Brand Manual, and are expected to follow the guidelines therein. Expectations include:
 - i. Use of the ADAMHS logo: The correct ADAMHS logo should appear on provider letterhead, brochures, flyers, website, displays, advertising, and any other printed or electronic tools used for promotion or education. The logo should also be prominently displayed in ways that remind employees, board members, clients and visitors that this organization is a part of the ADAMHS network. To obtain an electronic file of the ADAMHS logo, or for questions, contact the ADAMHS Director of Community and Public Affairs at 440-350-2193.
 - ii. Use of descriptive copy or language: The following is suggested language that ADAMHS Board contract providers should use in brochures, press releases, websites, and other educational and promotional tools. This (or similar) language is also appropriate to include in speeches or presentations:

Services at (Agency) are made possible in part through the Lake County ADAMHS (Alcohol, Drug Addiction and Mental Health Services) Board. Established by Ohio statute, the ADAMHS Board is responsible for planning, funding, and evaluating

Lake County's mental health and recovery services. More information on the services provided through the ADAMHS Board and its network of local providers is available on-line at www.HelpThatWorks.us.

- c. An ADAMHS brand presence is expected at agency events. Elements in that brand presence may include:
 - i. An ad, logo and/or descriptive copy in the event program
 - ii. An ADAMHS display at the event
 - iii. Mention of the importance of ADAMHS funding/support from the podium