

BEACON HEALTH OPTIONS OF PA (BEACON) IN PARTNERSHIP WITH
SOUTHWEST BEHAVIORAL HEALTH PARTNERSHIP (SBHM)
AND
BUTLER COUNTY HUMAN SERVICES
HAVE ISSUED THIS

**REQUEST FOR PROPOSALS (RFP) FOR
FAMILY BASED MENTAL HEALTH SERVICES
SERVING BUTLER COUNTY HEALTHCHOICES
CHILD/ADOLESCENT MEMBERS**

INSTRUCTIONS FOR SUBMISSION:

All completed RFPs must be submitted through the following means.

Electronic Delivery
Email a PDF copy of the signed RFP to: RFP-RFI4BeaconPA@beaconhealthoptions.com
Please type the title of the RFP and your organization's name in the subject line.

Proposals must be received by 4:00 p.m., September 1, 2021.

All pages of the proposal must be numbered.

Please submit the following information:

Agency Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Contact Person: _____

Submitted by: *(Please Print Name & Title)*

(Signature) _____ Date: _____

Background

Butler County Human Services and Beacon Health Options of PA (Beacon) maintain a comprehensive network of service providers serving HealthChoices recipients in need of mental health treatment. This extensive network offers diversity of location, choice, and specialization of services for all Butler County HealthChoices members. Recently Butler County Human Services, in partnership with Beacon and Southwest Behavioral Health Management (SBHM), has identified the need to expand Family Based Mental Health (FBMH) services available to children and their families in Butler County.

Butler County Human Services, in partnership with Beacon and SBHM (further referred to as the Partners), is seeking agencies interested in providing FBMH services that will primarily serve residents in the southern region of Butler County (Cranberry Twp., Seven Fields and Mars areas). FBMH services were developed to serve children at risk for out-of-home placement due to psychiatric diagnoses indicating severe emotional or behavioral disturbances. They also target children and adolescents who need reunification with their biological or substitute care families following discharge from inpatient hospitals or psychiatric residential placements.

FBMH services are designed to meet the family's needs through being individually tailored, family-centered, community based, interagency supported, culturally competent and least restrictive/least intrusive. FBMH services improve child and family functioning through time-limited, team-delivered family therapy, creating collaborative linkages between appropriate community and family resources, and providing family support funds for concrete services such as transportation, emergencies, creative treatment planning, and interventions.

The four (4) main components to the FBMH service are family therapy, case management, emergency crisis intervention, and family support services. Family therapy involves working to define the family's goals so that the team and family can gain an understanding of, utilize strategies and interventions, and discover ways to meet the family's needs. Family therapy can also include meeting with the individual family members to meet these goals. Case Management services work with other service agencies involved with the family and advocate for them with these systems. It also includes connecting families with additional resources and services to meet their needs. FBMH emergency crisis intervention is available 24 hour per day, 7 days per week through an on-call crisis line to assist families in managing crisis situations and de-escalating dangerous situations. Family support and stabilization services is part of the program that includes assisting financially in meeting specific needs of the family, as well as funding additional or creative methods of working with the family.

The goal of the program is to enhance parents' feeling of empowerment and self-efficiency so they can help themselves and their children. The function of FBMH services is to assist families with maintaining their child in the home rather than a psychiatric or residential facility. The program goals include reducing the number of crisis-driven emergency room visits for mental health issues.

Target Population

Children and adolescents up to the age of twenty-one (21) and their families that would benefit from a mobile, home and community based service focused on addressing mental health issues and strengthening the family unit.

All services provided for this level of care must adhere to all respective federal, state, and local standards and regulations.

MINIMUM QUALIFICATIONS

All applicants **must** meet the following minimum qualifications to be considered for this procurement process:

1. Hold a current Family Based Mental Health license within Pennsylvania.
2. Be currently contracted within the Beacon HealthChoices network to provide Family Based Mental Health Services for members.
3. Be willing to primarily serve children and families within the Cranberry Twp., Seven Fields and Mars area of Butler County.

Additional Preferred Qualifications

1. Provider has experience building collaborative relationships with other human service agencies, as well as knowledge of other community support resources for this target population.
2. Have knowledge of and/or existing collaborative relationships with other service providers and supports available in Butler County.
3. Be committed as an organization to the concepts of recovery and resiliency.

Intent

It is the intent of the Partners to solicit proposals with the goal of executing a contract. This notwithstanding, any proposal shall be submitted with the following expressed understanding:

- This Request for Proposals is not subject to the competitive bidding process and any contract entered into as a result of any proposal will not be based on the concept of the “lowest cost applicant”;
- The Partners have the right to reject any and all proposals at any time during the process;
- The Partners reserve the right to reject any applicant that does not sufficiently document that they meet the minimum qualifications to respond to this RFP;

- The Partners may modify the selection process or the scope of the project or the required responses at any time;
- All costs of developing proposals and any subsequent expenses relating to contract negotiations are entirely the responsibility of the applicant and may not be charged to the Partners.
- The proposal and all the materials submitted with the proposal will become the property of the Partners upon submission;
- Submission of a proposal by a provider constitutes express acceptance by the provider to be bound by all the terms, conditions, and provisions of the RFP, including but not limited to, all exhibits and/or appendices to the RFP.

Proposal Review

The Partners reserve the right to reject any and all proposals received as a result of this RFP and to negotiate separately with competing applicants. If all proposals are unacceptable, we reserve the right to reject the proposals and to issue a new RFP. The Partners reserve the right to reject a proposal at any time during the process.

Selection / Rejection Procedure

Applicants whose proposals are selected will be notified in writing as to their selection. Applicants whose proposals are not selected will also be notified in writing by Beacon.

RFP Award Conditions

Following award of the RFP, in order to secure a contract with Beacon for payment of this service, a provider must be able to complete the following steps. If a chosen provider cannot complete any of these steps, they will be determined ineligible to continue the process. If a provider is determined to be ineligible to continue the process, the partners reserve the right to terminate the process, reject the proposal, choose another applicant and/or issue a new RFP:

- Must hold a current Family Based Mental Health license within Pennsylvania.
- Must be currently contracted in the Beacon HealthChoices network to provide Family Based Mental Health services.
- Must agree to primarily serve children and families within the Cranberry Twp., Seven Fields and Mars area of Butler County.

Upon Award

- The standard Beacon reimbursement rate will be provided for this service.

There is no commitment by the Partners to anything beyond what is directly stated in this RFP.

All services provided for this level of care must adhere to all respective federal, state and local standards and regulations.

The award resulting from this RFP does not ensure that the need in the community is sufficient to support the development and/or sustainability of this service.

DIRECTIONS

1. Be sure your agency meets all the minimum qualifications prior to completing your response.
2. Respond to the questions in the sequence that they appear in the RFP and as completely as possible.
3. There is no page limit to responses and all pages must be sequentially numbered.
4. All responses must be typed using 12 pt. font.
5. Additional supporting or requested documentation should be attached as Appendices.

REQUEST FOR PROPOSALS

Please provide the following information regarding your interest in or ability to provide Family Based Mental Health Services to HealthChoices members residing in Butler County.

Agency Background and Experience: (total 40 pts)

1. Please provide a brief overview of your agency's experience serving this target population. Please describe in detail your background, experience and present activity, as well as your agency's philosophy and how it will enable the agency to successfully provide these services to children/youth and their families of Butler County. (10 pts)
2. Describe in detail the target population to be served through these services. Outline the agency's goals and objectives in meeting the needs of individuals and families identified as benefiting from these services. Describe any of the agency's unique characteristics that would directly benefit this target population. (20 pts)
3. Describe the agency's experience in collaborating and coordinating with other service agencies such as the educational systems, community organizations, and other providers within the Butler County Human Service System. (10 pts)

Programmatic: – (total 160 points)

4. Describe some of the characteristics and challenges of this HealthChoices population and how these children may benefit from these services. Include information detailing the agency's experience in treating children at risk for out-of-home placement and how your agency will integrate and provide crisis services as an aspect of the FBHM services. Please include a copy of the current crisis policy (i.e. how you will respond in crisis situations, phone vs. in person response, etc.) and a template of a crisis plan. (20 pts)
5. Describe the agency's staffing structure for these services (e.g. number of administrative staff, direct treatment staff, psychiatric/medical staff, clerical support staff and all other staff related to the delivery of this service), and the job responsibilities of each staff member within the FBMH program. (20 pts)
6. Provide a description of the proposed Family Based MH Program. Describe in detail the components of the program (e.g. criteria for admission, referral and intake process, length of service, treatment service modalities) to be employed in these services. Define the basic elements of the program as outlined in the program description, including program specific goals and objectives. Describe how goals and objectives will be measured. Clearly outline the services to be provided, including hours of activity and the projected number of individuals to be served. (20 pts)
7. Describe how the agency expects to conduct the assessment and treatment planning processes (e.g., what instruments will be engaged to perform assessments? What

admission and discharge evaluations will be performed? What will be the agency's treatment review process and discharge planning process? Clearly outline how the family will be engaged to ensure transfer of skills and how this will be measured to reflect successfulness). Please explain what screening tools you will use and their purpose. (20 pts)

8. Describe any of the agency's specialty services (for example trauma, autism, LGBTQI, etc.), that would directly benefit these children and their families. If the agency considers itself to be a specialist in treating certain diagnostic categories or disorders, please describe (explain why) and provide any relevant supporting documentation. Also, provide documentation/verification of expertise in serving any other special populations. (20 pts)
9. Describe your/your agency's experience serving complex children/adolescents (i.e. those with co-occurring disorders such as mental health, developmental disabilities, substance use disorders, etc.). Please outline your process for involving all members in the discussion regarding complex needs. Also, provide documentation/verification of expertise or certifications staff may have in serving any of the above listed special populations. (15 pts)
10. Describe the role cultural competency plays in the delivery of the proposed services and throughout your agency. Outline specific activities that may be included in the proposed program which will address and improve cultural relevance of the program for participants. Explain how cultural differences could be integrated into the program and in what capacity can cultural competency serve as the mechanism for addressing behavioral health disparities in the program and in the agency. (10 pts)
11. In light of the recent workforce limitation issues, please describe in detail how your organization has achieved success with staff recruitment and retention over the past three (3) years with particular attention to the previous year. Include data and outcomes to support your narrative. Please detail your strategy to recruit and retain the necessary staff for this new program. (25 pts)
12. Describe your agency's commitment to the concepts of recovery and resiliency with respect to the principles of CSP and CASSP. Explain how you intend to ensure ongoing program focus on the concepts of recovery and resiliency, including how individuals will be involved in the planning and implementation process. (10 pts)

Quality Assurance: (total 20 points)

13. Describe the agency's potential plan for continuous quality monitoring and improvement. Outline what outcome measures could be in place that would demonstrate the effectiveness of the program. (20 pts)

Outcome measures should be based on Recovery & Resiliency-Oriented principles:

- a. Improving quality of life
- b. Individual and family satisfaction

- c. Improving community integration regardless of the environment
- d. Participation in meaningful activities and social relationships
- e. Discharge Choice
- f. Peer and Community supports
- g. Achieving positive clinical outcomes

REQUIRED ATTACHMENTS

IF THESE REQUIRED ATTACHMENTS ARE NOT PROVIDED, THE SUBMISSION WILL NOT BE CONSIDERED COMPLETE AND WILL BE EXCLUDED FROM THE REVIEW PROCESS.

14. Attach all the necessary documentation to demonstrate that your agency meets each of the below listed Minimum Qualifications to respond to this RFP. Please ensure that the documentation is current and reflective of the appropriate minimum standard. Also, for appropriate criteria listed below, provide a timeline outlining when your agency can be expected to complete/meet the criteria. (total 0 points – all required)

- Hold a current Family Based license from the Pennsylvania Department of Public Human Services (**Attach copy of current license**) **Required - 0 points.**
- Be currently contracted to provide Family Based Mental Health Services within the Beacon HealthChoices network (**Attach appropriate documentation**) **Required - 0 points.**

END OF REP

Total points without bonus points - 220