



**Macomb County Community Mental Health Services**

**Macomb County Community Mental Health**

**Office of Substance Abuse**

**(MCOSA)**

**REQUEST FOR PROPOSALS**

**For**

**Outpatient/Ambulatory Substance Use Disorder Treatment  
Services**

Issued November 24, 2020

*Proposals Are Due To The MCOSA Office No Later Than:*

***January 4, 2021 at 11:00 am***

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# REQUEST FOR PROPOSAL

Issued By  
Macomb County Community Mental Health  
Office of Substance Abuse  
22550 Hall Road, Clinton Township, MI 48036

**PROJECT TITLE:** Substance Use Disorder Opioid Health Home Services

**RFP ISSUE DATE:** November 24, 2020

**PROPOSAL DUE DATE:** January 4, 2021 - 11:00 am

**CONTACT PERSON:** Helen Klingert, Director of Substance Use Services  
Macomb County Community Mental Health  
22550 Hall Road, Clinton Twp., MI 48036  
(586) 469-5278

## I. GENERAL INFORMATION

### Introduction

Macomb County Community Mental Health (MCCMH) issues this Request For Proposal (RFP) to provide interested bidders with sufficient information to enable them to prepare and submit a proposal for consideration to provide Outpatient/Ambulatory Services (ASAM Level 1, 2.1 and 2.5) for individuals with a substance use disorder who qualify for Macomb County Medicaid, Healthy Michigan Plan (HMP), MI Child or Community Grant (Block Grant, PA2) funded services in an Outpatient Treatment setting. Services must take place in Macomb County at a location(s) that is accessible and conveniently located for the population to be served. It is expected that the proposal to provide these services will be in compliance with all applicable Federal, State and MCCMH standards and guidelines.

### Response Date

To be considered, proposals must arrive at the Issuing Office on or before **Monday, January 4, 2021 by 11:00 am**. Late proposals will not be accepted or reviewed.

### Pre-Bid Meeting

**A virtual pre-bid meeting will be held on December 1, 2020 at 9:00 a.m.**

The purpose of this meeting is to discuss with prospective bidders the work to be performed and to discuss questions that arise from reviewing this RFP. Any response

that alters this RFP will be posted under the “Provider Links” on the MCCMH website at [www.mccmh.net](http://www.mccmh.net). To participate in the Pre-Bid meeting, please use the following link. [https://mccmh-net.zoom.us/j/93716486556?pwd=aGQ1K3NNZjI5WnZlQ0NDRmNuTjR6QT09](https://mccmh-net.zoom.us/j/93716486556?pwd=aGQ1K3NNZjI5WnZlQ0NDRmNuTjR6QT09;); Meeting ID: 937 1648 6556; Passcode: 258137; Phone: 877 853 5257

### **Incurring Costs**

MCCMH is not liable for any cost incurred by contractors prior to issuance of a contract.

### **Acceptance of Proposal Content**

The contents of the proposal of the successful bidder may become contractual obligations if a contract ensues. Failure of the successful bidder to accept these obligations may result in cancellation of the award.

### **Contract Negotiations**

Negotiations may be undertaken with those potential contractors whose proposals prove them to be qualified, responsible and capable of performing the work. The contract that may be entered into will be that which is most advantageous to MCCMH. MCCMH reserves the right to consider proposals or modifications thereof received at any time before the award is made, if such action is determined to be in the best interest of MCCMH.

### **Oral Presentation**

Bidders who submit a proposal may be required to make an oral presentation of their proposal.

### **Prime Contractor Responsibilities**

The selected contractor will be required to assume responsibility for all services offered in his/her proposal, whether or not the contractor produces them.

### **Liability**

The contractor will be responsible to prevent MCCMH from any liability for actions or claims accruing or resulting from his/her activities performed under the terms of a contract resulting from this RFP. This responsibility includes securing and providing MCCMH with all necessary copyright releases and other permissions regarding materials and products protected under Public Law 94-533 that are used.

### **News Releases**

News releases pertaining to the RFP or the services, study or project to which it relates will not be made without prior MCCMH approval, and then only in coordination with the Issuing Office.

## **Disclosure of Pre-Proposal Contents**

All information submitted in response to public RFPs may be divulged under the provisions of the Freedom of Information Act (FOIA). Confidential or proprietary information cannot be shielded from disclosure under the FOIA requirements for a public bid process.

## **Addenda to the RFP**

In the event it becomes necessary to revise any part of this RFP, addenda will be posted under the "Provider Links" at [www.mccmh.net](http://www.mccmh.net).

## **Rejection of Proposals**

MCCMH reserves the right to reject any and all proposals received as a result of the RFP, or to negotiate separately with any source whatsoever in any manner necessary to serve the best interests of MCCMH. This RFP is made for information and planning purposes only. MCCMH does not intend to award a contract solely on the basis of any response made to this request, or otherwise pay for the information solicited or obtained.

## **Right to Re-bid**

MCCMH reserves the right to re-bid all or some components of this RFP in the event of significant changes to Medicaid Policy.

## **Post-Contract Award Conference**

A meeting will be held between the selected contractor and MCCMH to review expectations of performance for the submitted proposal, as needed.

## **Disclosure**

Bidders must acknowledge any relationship between the bidder's principal officers and board members, and any members of MCCMH (to include staff employees, board members, and principal directors). Disclosure must also be made regarding the bidder's relationship, if any, with any member of the Macomb County Board of Commissioners or any Macomb County Department Head.

## **Debarment and Suspension**

Bidder agrees to comply with Federal regulation 2 CRF Part 180 and certifies that they:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
2. Have not been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to

obtain, or performing a public (federal, state, or local) transaction or contract under a public commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated above, and;
4. Have not had one or more public transactions (federal, state or local) terminated for cause or default.

### **Program Data Reporting Requirements**

The selected agency will be required to participate in MCOSA's web-based data system. Current components of this system include web-based submission of: admission/discharge information, initial requests for authorization of services, requests for re-authorization of services, and billing and prevention activity data. There may be other additional programmatic reporting requirements that will be requested by MCOSA on a regular or occasional basis.

### **Financial Reporting Requirements**

The selected agency will enter into a contract with MCOSA on a fixed unit rate reimbursement. Reimbursement will be rendered through valid web-based claim submissions. Other financial requirements include, but may not be limited to, yearly budget submissions and periodic budget amendments, annual report of actual fees collected from MCOSA funded clients, and a copy of the A-133 or financial audit as required by OMB guidelines.

### **Evaluation Period and Process**

Substance use disorder activities funded under this RFP will be subject to a qualitative and quantitative evaluation. Respondents are expected to have in place an internal evaluation system to monitor program activities and results. In addition, the program must participate in and provide documentation of client satisfaction. The respondent must agree to participate in any additional evaluation(s) that MCOSA may deem necessary and cooperate with the Michigan Department of Community Health efforts in external evaluation of Medicaid services.

### **Independent Price Determination**

1. By submission of a proposal, the bidder certifies, that in conjunction with this proposal:
  - a. The prices in the proposal have been arrived at independently, without consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with another bidder or with any competitor;

- b. Unless otherwise required by law, the prices which have been quoted in the proposal have not been knowingly disclosed by the bidder to award directly or indirectly to any other bidder or to any competitor; and
- c. No attempt has been nor will be made by the bidder to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.

2. Each person signing the proposal certifies that:

- a. He/she is the person in the bidder's organization responsible within that organization for the decisions as to the prices being offered in the proposal, and that he/she has not participated, and will not participate in, any action contrary to 1-a, 1-b and 1-c above; or
- b. He/she is not the person in the bidder's organization responsible within that organization for the decision as to prices being offered in the proposal, but that he/she has been authorized, in writing, to act as agent for the persons responsible for such decisions in certifying that such persons have not participated, and will not participate in, any action contrary to 1-a, 1-b and 1-c of this RFP, and as their agent, does not hereby so certify; and that he/she has not participated, and will not participate in any action contrary to 1-a, 1-b and 1-c above.

### **Contract Award Date**

The bidder(s) selected through this process will be awarded a contract through September 30, 2021, with an MCCMH option for renewal for two, one-year engagements at MCCMH's discretion, dependent on performance, funding availability, and other factors.

It is anticipated that contract(s) will be awarded on or before March 1, 2021, for services to begin March 1, 2021 through September 30, 2021 as agreed upon by the Bidder and MCCMH. Bidders who are awarded contracts shall not assign or delegate any duties or obligations under the contract without written permission of MCCMH.

## **II. Minimum Contractor Requirements**

Interested respondents must meet and agree to the following minimum requirements to be considered for funding:

- A. Possess a valid Standard substance use license from the state of Michigan appropriate to the level of service(s) to be delivered.
- B. Have, or obtain prior to contracting, the Office of Recovery Oriented System of Care ASAM approval for each level of service proposed to be offered.
- C. Possess accreditation by one of the national accrediting bodies (JCAHO, CARF, COA, AOA or NCQA) for the services proposed.

- D. Have the necessary systems in the areas of administration and clerical support for the program. This includes the necessary computer equipment, compatible software and Internet connections to be able to electronically request authorization for services and submit data and billing; a valid, active and maintained email account that can receive and submit communications is also required.
- E. Have an established financial system in operation which meets generally accepted accounting principles and systems.
- F. Demonstrate an ability to understand, relate to, and operate within an ethnic, racial, age, and economically diversified population. In addition, the services will be provided in settings accessible and acceptable to individuals and communities intended to be served.
- G. Agree to federal, state and local Affirmative Action guidelines as they relate to personnel and services.
- H. Agree to report statistical and financial data on the forms, format and schedule required by MCOSA.
- I. Agree to develop and maintain a Corporate Compliance Policy and submit valid Annual Reports.
- J. Agree to comply with Federal Confidentiality, Privacy and Security Regulations and State Confidentiality laws.
- K. Have sufficient amount of Medicare/third party approved therapists available to serve Medicare/third party eligible clients who also receive MCOSA funds. Preference will be given to bidders who have the ability to serve major third party insurances and coordinate benefits.
- L. Have the ability to offer individuals served timely access to services. Bidders are expected to assist individuals in entering services as soon as possible, but must offer an appointment no longer than seven (7) days from request for services.
- M. Agree to have appropriately licensed/credentialed staff as required by MCCMH (see Appendix I, "Staff Credentialing and Qualifications"). MCCMH seeks subcontractors who employ a sufficient workforce of persons with lived experiences across all levels who are paid fair and competitive wages commensurate with their position and with other employees of the same pay grade, and provide multiple opportunities for full and/or part-time positions, and a viable career ladder. Subcontractors will be required to make affirmative efforts to employ individuals with disabilities.
- N. Agree to participate in MCCMH's web-based data system. Current components of this system include web-based submission of: admission/discharge information, initial requests for authorization of services, requests for re-authorization of services, and billing data. There may be other additional programmatic reporting requirements that will be requested by MCCMH on a regular or occasional basis.

### III. REQUESTED SERVICES AND EXPECTATIONS

#### A. **ASAM Level 1 Outpatient Treatment Services**

Requested Services To Be Delivered: The focus of this RFP area is on outpatient treatment services for indigent and Medicaid clients residing in Macomb County. The target population for these services would include Medicaid, Healthy Michigan Plan, MIChild, MI Health Link and community grant eligible children, adolescents and adults in need of outpatient treatment regardless of sex, race, national origin, religion or handicap. Proposals should detail specific services to be provided to special populations (i.e., cultural and gender specific, co-occurring disorders, adolescents, women, older adults, etc.). MCOSA will place emphasis on proposals that incorporate group treatment as the main modality of service for clients.

Outpatient treatment is organized, non-overnight stay treatment services with clinicians educated and trained in providing professionally directed alcohol and other drug treatment. Treatment occurs in regularly scheduled sessions. Services are provided in the amount, frequency and intensity appropriate to the client's treatment plan in eight or less hours per week.

Treatment Expectations:

1. All services rendered must be based on medical necessity, utilizing the most current DSM criteria and ASAM Criteria for outpatient treatment.
2. All services provided must be individualized to meet the specific need of the client and matched to the client's stage of recovery (pre-contemplation, contemplation, action, maintenance/relapse prevention).
3. The program will provide a continuum of services that corresponds to the needs of the clients served and address how the following minimum services will be provided to clients as needed, utilizing intake assessment, group counseling, didactic groups, individual counseling, family therapy, alcohol/drug screens, communicable disease didactics, psychiatric evaluations and medication reviews for clients with co-occurring substance abuse and mental health issues and/or coordination of services with treating physician, and referral to medical, social, educational, vocational, self-help, or other services as indicated.
4. Group Treatment: MCOSA places an emphasis on group treatment as the main modality of care for substance use disorders as it is proven effective and efficient. It is expected that group treatment will vary in type to meet specific needs and matched with Readiness to Change criteria.

#### B. **ASAM Level 2: Intensive Outpatient and Partial Hospitalization Treatment**

Requested Services to be Delivered: The focus of this RFP area is on ASAM Level 2 services. The target population for this service would include block grant, PA2, Healthy Michigan Plan, MIChild, MIHealth Link and Medicaid eligible clients in need of intensive outpatient or partial hospitalization treatment regardless of sex, race,

national origin, religion or handicap. Proposals should detail specific services to be provided to special populations (i.e., gender specific, co-occurring disorders, culturally specific, adolescent specific groups, etc.) as applicable. Services must consist of regularly scheduled treatment, usually group therapy, within a structured program, for at least three days and at least nine hours per week for ASAM 2.1 services, or 20 hours or more per week for ASAM 2.5 services.

Treatment Expectations:

1. All services rendered must be based on medical necessity, utilizing the most current DSM criteria and meet ASAM Patient Placement Criteria for Intensive Outpatient treatment.
2. All services provided must be individualized to meet the specific need of the client and matched to the client's stage of recovery (pre-contemplation, contemplation, action, maintenance/relapse prevention).
3. The program will provide a continuum of services that corresponds to the needs of the clients served and address how the following minimum services will be provided to clients as needed, utilizing intake assessment, group counseling, didactic groups, individual counseling, family therapy, alcohol/drug screens, communicable disease didactics, psychiatric evaluations and medication reviews for clients with co-occurring substance abuse and mental health issues and/or coordination of services with treating physician, and referral to medical, social, educational, vocational, self-help, or other services as indicated.

#### **IV. CONTENT OF PROPOSAL**

The contents of this RFP may become incorporated by reference within any resulting contract signed by MCCMH and the selected bidders.

Responses must include the Bidder name on each page. Responses must be single spaced, Arial font size 12. Number all pages consecutively, starting with the first page. A Table of Contents page is required for all submissions. Submissions must follow the outline order as indicated below for proper consideration to be given each section, using title headings as indicated below. Proposals submitted without applicable information (i.e., incomplete content) may result in the proposal being removed from consideration.

The proposal must be submitted in six (6) copies to the Issuing Office. **No stapled pages or special binding.** An official authorized to bind the contractor to its provisions must sign the proposals. For this RFP, the proposal must remain valid for at least ninety (90) days.

The content of the RFP should include the following:

A. **Provider Narrative** - Submit a narrative that includes the information outlined below:

1. Description: An overall description of your agency/organization including its history, philosophy and mission, and philosophical approach to substance use

disorder services.

2. Population Served: Targeted population(s) currently served by your program.
3. Organizational Experience: Description of previous organizational experience or other relevant experience demonstrating the organization's ability to provide the proposed services, including contract experience with a Prepaid Inpatient Health Plan (PIHP).
4. Staff Qualifications: Specify the level/type of credentials required, the minimum educational requirements and any experience requirements related to proposed services. Indicate the staff ratio; provide information on the type and frequency of supervision provided. Submit a list of all direct service staff that would provide service under this funding by name, degree, licensure and/or credential on Form C, "Staff Qualifications". If any staff member has proficiency in a language other than English, please indicate the language and whether they are able to provide substance use disorder services.
5. Quality Assurance: Describe the program's quality assurance activities as they pertain to quality assurance monitoring efforts; client satisfaction results; recipient rights complaints and their resolutions; and performance improvement activities.
6. Outcome Measures: Describe outcome measures to be collected, monitored and reported related to proposed services. Indicate how this data will be used to evaluate the effectiveness of the services, including retention rates.
7. Care Coordination: Describe the program's current and/or planned care coordination with other physical health care/specialty providers and behavioral health care providers.
8. Trauma Informed Care: Trauma informed care requires staff at all levels of an organization to have a basic understanding of how trauma affects the life of an individual seeking services. Programs and services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization. Describe steps the agency has taken/will take to provide trauma informed care.

**B. Services Delivery** - Bidder must describe the major activities and methods to be used in providing each service being proposed, as specified below.

1. Indicate level(s) of care to be provided: Level 1 Outpatient, Level 2.1 Intensive Outpatient, and/or Level 2.5 Partial Hospitalization.
2. Separately, for each service level proposed (ASAM Level 1, Level 2.1, and Level 2.5), specify the number of days and hours per week services will occur to support the ASAM level.
  - a. Level 1 Outpatient

- b. Level 2.1 Intensive Outpatient
  - c. Level 2.5 Partial Hospitalization
3. Separately, for each service level proposed, provide a description of types (group, individual, etc.) and frequency of services to be provided.
    - a. Level 1 Outpatient
    - b. Level 2.1 Intensive Outpatient
    - c. Level 2.5 Partial Hospitalization
  4. Indicate evidence based practice(s) being used and/or describe program curriculum.
    - a. Level 1 Outpatient
    - b. Level 2.1 Intensive Outpatient
    - c. Level 2.5 Partial Hospitalization
  5. Indicate how and when Readiness to Change is evaluated. Describe the services provided for each of the Stages.
  6. Describe use of Motivational Interviewing/Enhancement techniques, indicating the number/percent of staff providing Motivational services and types of training received.
  7. Indicate method and frequency of evaluating progress during the course of treatment.
  8. Describe the level of integrated co-occurring treatment services that are provided (capable or enhanced), including a description of availability of psychiatric supports.
  9. Describe process for linking clients with medical, social, educational, vocational, or other services as indicated.
  10. Describe strategies used to engage clients in counseling services, increase retention in treatment and reduce barriers to services. Include any innovative strategies used such as Welcoming approaches, transportation assistance, appointment reminder calls, Contingency Management, therapeutic alliance approaches, etc.
  11. Describe strategies to improve client transition between service levels and aftercare.
  12. Indicate availability of emergency and after hours services (i.e., on call person, answering service, etc.).
  13. Describe any other innovative approach or services being proposed.

C. **Organizational Description** - Submit the following information:

1. An Organizational Chart
2. A list of current Board of Directors (identify Officers; include Advisory Council, if applicable)
3. Resumes for the Executive Director and Clinical Director
4. Documentation of clinical job descriptions and qualifications
5. Documentation of Accreditation (most recent report)
6. Malpractice Liability Insurance: Submit documentation of professional liability (malpractice) insurance protection, sufficient for the size of the program, but not less than \$200,000.00 per occurrence, \$600,000 annual aggregate, and commercial general liability policy with coverage and limits of at least \$1,000,000.00 per occurrence, \$2,000,000.00 annual aggregate limit.
7. Copy of most recent financial audit. For the purposes of RFP only, a financial statement review will be accepted if a financial statement audit has not been performed previously.
8. A completed IRS W-9 form (FORM D)

D. **Financial Information**

Fixed Unit Rate bidders must complete Form B, Service Summary and Public Funding/Insurance Participation (Budget) Form. Instructions are included on the form.

E. **Required MCOSA Forms**

- FORM A – Complete and submit the Provider Profile Application sheet
- FORM B – Complete and submit the Service Summary and Public Funding/Insurance Participation Form
- FORM C - Complete and submit the Staff Qualifications Form
- FORM D – Complete and submit the W-9 Form

## **V. CRITERIA FOR SELECTION**

All proposals received will be subject to an evaluation by the Issuing Office as deemed appropriate for the purpose of selecting the contractor with whom a contract will be signed. The following factors will be considered in making the selection:

- A. Compliance “Minimum Contractor Requirements”

- B. Demonstration of ability to meet the "Scope of Services" as outlined in the RFP
- C. Prior experience in substance use disorder programming and work experience with the target population as responded to "Provider Narrative" and "Organizational Description" areas of the RFP
- D. Demonstration of the ability to provide the required "Service Delivery" as outlined in the RFP
- E. Thoroughness of the proposal: the professionalism of the response and compliance with the directives of the RFP and ability to initiate, implement and maintain the services to the target population.

## **VI. REFERENCED APPENDICES**

- I. Staff Credentialing and Qualifications