

**North Texas Behavioral Health Authority
As the Local Behavioral Health Authority**

**Request for Application
Open Enrollment**

**Adult and Child/Youth Mental Health and Substance Use Disorder Services
RFA# 2016-001**

Frequently Asked Questions

ADDENDUM

To: All Interested Proposers
From: Brittony McNaughton
Date: May 25, 2016

Subject: Adult and Child/Youth Mental Health and Substance Use Disorder Services RFA #2016-001

This Frequently Asked Questions document includes responses to all questions submitted to date. Please note that questions that are highlighted in yellow include answers that have been revised due to the RFA amendment released on May 19, 2016. Questions that are highlighted in green have been removed due to the RFA amendment released on May 19, 2016. Any questions or additional information required by interested vendors must be emailed to bmcnaughton@ntbha.org. RFA number must be on the "Subject Line" of the email. Failure to follow this requirement may result in questions being unanswered.

- 1. When we started NorthSTAR, we did away with our supportive residential services as a step down from intensive residential because that level of care was no longer recognized, but I see they are included in this RFP. So is it anticipated that members would first get intensive and then supportive residential in this new system?**

Intensity of residential treatment services will be determined based on DSHS's Client Placement Guidelines. Intensity and content of treatment shall be consistent with standards of care. Services shall be appropriate for each individual admitted, with documented justification to support the admission. The applicant may propose services that comport with those guidelines and propose a pricing structure.

- 2. I am confused about the outpatient services. As I read it, members would get 42 total hours of outpatient group. Since our groups are 3 hours daily, it only computes to 14 days, whereas under NorthSTAR, members are authed by sessions and get a total of 38. This would reduce our clients' outpatient days by more than half. Am I interpreting this correctly?**

The hours referred to in the RFA are based on average utilization. The number of hours authorized will be based on medical necessity and client need.

- 3. This RFA is open for just out-patient services or is it for both residential and outpatient? Previously, there were going to be two applications to be completed, one for open-enrollment and one for regional services, such as residential.**

This RFA seeks applicants for all comprehensive outpatient community mental health services as described in Attachment B and all substance use disorder services as described in Attachment C.

- 4. I don't see in the RFA where the instructions list how to format and where to insert the price/service proposal. How and where do you suggest we do this?**

Refer to Section IV. Services in the RFA. The applicant should list the specific services and price for which they are applying. If bundling services, the applicant must list the individual services being bundled.

Refer to Section IV. Services in the RFA. The applicant should provide a list of the services for which they are applying. A separate request for rates for services will be made once applications have been reviewed and determined compliant with requirements of the RFA.

- 5. In proposing price, are we limited to the 2016 rates and if proposing a case rate, are we free to establish the case parameters? For example, if we say we're going to provide intensive residential treatment for a case rate of \$3000 based on \$100 per day for an anticipated need of 30 days to achieve successful outcome. Based on this, if we were able to achieve a successful outcome in 24 days, we would still get the \$3000. If it took us 35 days to achieve a successful outcome, then we would still get just \$3000. Would this be an acceptable understanding of case rate parameters?**

Applicants can propose any pricing structure. NTBHA is obligated to negotiate pricing that represents the best value for the use of public funds and will negotiate with applicants to meet that obligation.

This item has been removed due to the RFA amendment released on May 19, 2016.

- 6. Are there any other related RFAs that will be coming out?**

This RFA seeks applicants for comprehensive outpatient community mental health services as described in Attachment B and substance use disorder services as described in Attachment C. At this time, NTBHA does not plan to release an RFA for the procurement of any additional service types. NTBHA will procure certain services through a competitive Request for Proposals (RFP) method of procurement. Services to be procured by RFP may include but are not limited to:

- Crisis Hotline
- Mobile Crisis Outreach Team
- Single Portal Authority and related Civil Commitment services
- Texas Correctional Office on Offenders with Mental and Medical Impairments services
- Extended Observation Services
- Inpatient Psychiatric Services
- Supported Housing Services
- Crisis Respite Services
- Crisis Residential Treatment

- Crisis Stabilization Unit
- Co-Occurring Psychiatric and Substance Use Disorder Services
- Youth Empowerment Waiver Services
- Recovery Support Services – Community Based Organizations

- 7. “Describe how Applicant plans to communicate with the Local Authority regarding the Client referral process, specifically what are the parameters around access.” I am not clear about what is being asked here.**

Section IV. A. should include a description of applicant’s data and communication capacity. Applicant should include capabilities and mediums (secure email, phone, fax, etc.) to effectively communicate with NTBHA and provide necessary information when a client presents for services and an assessment is initiated. Applicants should also describe their processes for receiving referrals, monitoring capacity and notifying NTBHA when capacity has been met, as well as processes for coordinating referrals to alternate providers.

- 8. Do you want the Exhibits at the end of the application or in the order of the application? This was not addressed in the application.**

All supporting documentation should be attached to the appropriate section of the Proposal and in the order described in the Application Outline section.

- 9. I had a question about the financial part of the RFP where it talks about needing to submit the past 3 years financial audits. Since we have been a private for profit company in the past, we have not gone through any financial audits. We have initiated the process of converting to a Texas non-profit corporation. How would this process work for submitting financial audits, or are you looking for the last 3 years of business returns?**

Please submit the last 3 years compiled year end financials or last 3 years of tax returns. Items should be marked proprietary as appropriate.

- 10. Does this RFA include Emergency Department Services as part of what is meant by The Local Authority’s Procurement of Outpatient Behavioral Health Services (Line 12)?**

This RFA does not include Emergency Department Services. NTBHA plans to release an RFP for services delivered in Emergency Departments.

- 11. Lines 51 and 52 states- Organizations must have provided behavioral health services in the NorthStar service area for two years prior to September 1, 2016. Does this mean that a contract for such services must have been in place for those two years?**

Yes, applicants must have provided the behavioral health services for which they are applying under contract with the NorthSTAR Behavioral Health Organization, ValueOptions, for at least two years prior to September 1, 2016.

- 12. Parkland Health & Hospital System has several community based clinics (Community Oriented Primary Care). These clinics provide mental health services for patients with mild to moderate conditions and supports medications of all types for Priority Population conditions. Lines 15 through 21 and lines 432-436 seem to indicate that these clinics are not eligible to participate in this RFA. Is this correct?**

The general revenue funds are restricted to paying for services provided to the priority population.

- 13. Regarding Attachment B numbers 16, 17, 19, 20, 21, and 22; currently we do not provide these services. Is it a requirement to either build or contract for these services in order to be eligible to apply under this RFA?**

Comprehensive Mental Health providers must have the ability to provide all core services as identified in Attachment B other than those identified as optional.

- 14. We plan on submitting electronically. Some of our files will be large will NTBHA have to capability of accepting these emailed files?**

NTBHA can receive files up to 10MB. Files that exceed 10MB can be broken down into smaller files and should be clearly labeled for electronic submission.

- 15. Can an organization that has multiple locations do an RFA for each location or is it one RFA per organization?**

Applicants should submit one application per organization.

- 16. Will we be credentialed as a facility like we are with VO, if so do we need to submit roster and licensure information on all staff or just the organization?**

Applicant will be credentialed as a facility. Applicants must submit a roster and licensure information on all licensed staff who are required to have licenses for services they are providing. Staff providing case management and rehabilitation services will bill under a facility license, however, training and certification must be maintained according to community standards.

- 17. On the IT section where it is talking about transmitting clients and services, is that talking only encounter data? Wasn't sure if it also needed to include batching to CMBHS and claims as well?**

Applicants should describe all relevant IS resources and expertise that can be utilized for submission of client and service information.

- 18. 212-213 Provide a map of locations which specifies the Services provided, capacity and languages spoken (by 212 Service) at each location - Label as Exhibit IA. Are you requesting a map of the city in reference to our locations (i.e. Google map)?**

Applicants should provide a map(s) that identifies each location included in the submission in relation to the service delivery area.

- 19. 238-247 B. List the names and business affiliations of board members or other governing body: Am I allowed to provide this information as an attachment as we have 22 board members.**

Yes, an attachment will be allowable.

- 20. Under IV. Services line 268, item A, Not sure what information you are looking for**

- a. Is it criteria for providing care?
- b. By “plans to communicate” do you mean: via telephone, email, FAX for specific situations?
- c. Would you please provide an example of what you mean by “parameters around access”

Please refer to the answer to Question #7.

- 21. Under VI. Risk Profile, Line 305, Item A. Do you mean risk management related to**
- a. client care?
 - b. facility?
 - c. providers?
- Please give me an example**

We request your risk management plan which should be related to areas of client care, facility, and providers. Respondent is responsible for identifying appropriate examples.

- 22. Under the services section Item H, persons with disabilities, is that mental illness, IDD, or individuals with physical disabilities and would be are we ADA compliant?**

Applicants should describe access to services in relation to ADA compliance.

- 23. Under the business demographics section, Line 212, MAP of Locations, do you just want a list of addresses for all of the locations for the RFA or an actual MAP to the locations?**

Please refer to the answer to Question #18.

- 24. For line number 335 L. Attach any policies and procedures regarding medical records security? Do you want electronic security or PHI disclosure in general?**

Applicants should attach any and all policies and procedures related to medical records security. This should include PHI as well as physical/electronic security of records

- 25. The RFA requests the following: Attach copies of the Applicant’s last three years audited financial reports. Question: Our agency does not have audited financials for just the Texas operation. Will NTBHA accept unaudited financials?**

Please submit the last 3 years compiled year end financials or last 3 years of tax returns. Items should be marked proprietary as appropriate.

- 26. What is needed for this question item?: Provide copies of recent reports showing the Applicant’s performance relative to its utilization management requirements.**

Applicant should include any reports showing how organization monitors utilization against clinical criteria, including monitoring capacity and managing services.

- 27. On Section III Quality Management/Utilization Management the Exhibit labels are off in B thru E do we just need to label appropriately? The Exhibit numbers are off in the Risk Profile too.**

Please label the Exhibits using the exhibit identifiers noted in the RFA document.

28. On the business affiliations for the board members, can you elaborate on this? What exactly does this mean?

Applicants should list the names of each member of the board or other governing body along with the name of any business the member is involved with through ownership, management, employment, or other relationship involving a controlling interest.

29. Does line 86 below refer to having served more than 200 INDIGENT clients in FY 2015 or MEDICAID & INDIGENT or what exactly does this mean?

Comprehensive Mental Health Service Providers who served less than 200 persons qualifying for NorthSTAR as indigent in FY 2015 may propose a fee for service rate.

This item has been removed due to RFA amendment released on May 19, 2016.

30. With regard to RFA #2016-001, do interested applicants have to provide services to both Adults and Children/Youth, or can we choose to only provide services to Children/Youth?

Applicants may choose to provide services to Adults, Children/Youth or both. Applicants are not required to serve both age groups, but must be able to provide the full array of services that are listed in Attachment B other than those identified as Optional for the proposed age group.

31. In order to get all of the attachments behind the appropriate section we will need to pull apart the document, is this allowed? We would have each section on its own page and the supporting documents behind them. One more thing on this question can we remove the line numbers?

Yes, that format will be allowed. It is also permissible for Applicants to remove the line numbers when formatting the application submission.

32. We were reviewing the Application and tried to work on it but found that it is directed only for companies already established in the market with a long history. Because of our target population, we are receiving request for services and we are referring them to other Bilingual Providers with NorthStar Program. The clients are coming back because they are placed on 2 or 3 months waiting list or at that time the organization do not have any Bilingual Staff. Are new companies going to have to get several years of history in order to qualify for the State Indigent Program?

NTBHA is focused on provider network development aimed at minimizing disruptions to client care during this initial phase of transition and implementation of the updated indigent behavioral health system. NTBHA will engage in a continuous process of provider network evaluation and network development with a focus on access and consumer choice and offer opportunities for provider contracting that are responsive to community needs and in line with the Authority's Local Provider Network Development Plan.

33. 270-272 "Describe in detail the array of Behavioral Health Services the Applicant would offer under its Proposal. Identify units of Service, where Services are offered, who would provide Services (education and credentials), and the times of day and days of the week the Services would be available." Is the Applicant to propose units of service or follow established guidelines? Which guidelines?

This item seeks to gain information about Applicant's capacity for each service category and service type that will be provided. Applicants will be expected to follow service definitions and guidelines as noted in the RFA.

34. 273 - "Include a copy of Services schedules and descriptions." What do you mean by Services schedules and descriptions?

Please include any program descriptions related to the services applicant is proposing to provide and the schedule of availability for these services.

35. You stated in a meeting that providers would propose their own rates, yet there does not seem to be a place in the RFA for this. Should we submit a proposed rate sheet or will this happen as part of contract negotiations?

~~Further instructions will be coming regarding payments/rates.~~

The rate under this RFA will be the existing rate as of May 30, 2016 for each Provider as specified in their current contract with ValueOptions. That rate will be honored up to August 31, 2017 contingent upon availability of funds. A separate request for rates for services will be made once applications have been reviewed and determined compliant with requirements of the RFA.

36. On page 28, Attachment C of the RFP, the first sentence reads: "Applicant may propose to provide substance abuse treatment for one or more of the following service types. ... Applicants may choose to provide a service type within a Program without providing each service type under that Program, (e.g., Applicant may provide TRA Adult Outpatient Services without providing TRA Adult Intensive Residential Services). "And Line 53 states that "MH providers must have the ability to provide all core serves as identified in Attachment B.....", but does NOT say Attachment C. However, your answer to FAQ #3 states that " RFA seeks applicants for all comprehensive OUTPATIENT community mental health services described in Attachment B and all substance use disorder services as described in Attachment C. " Would you please clarify this discrepancy?

Applicants may propose to provide only mental health services, only substance use disorder services, or may propose to provide both. Applicants proposing to provide only mental health services must have the ability to provide all core community mental health services as identified in Attachment B, but are not required to provide the substance use disorder services described in attachment C. Applicants proposing to provide substance use disorder services may propose to provide substance abuse treatment for one or more of the service types described in Attachment C, but are not required to provide all service types.

37. We are applying to provide the same behavioral health services that we have provided under contract with NorthSTAR ValueOptions, for at least two years. In addition, I want to propose to add youth substance use services. We did not provide these services through NorthSTAR ValueOptions, but have provided them in other areas for at least the past two years. Is this permitted?

For the purposes of this current RFA applicants must have provided the behavioral health services for which they are applying under contract with the NorthSTAR Behavioral Health Organization, ValueOptions, for at least two years prior to September 1, 2016. NTBHA will immediately begin a process of provider network planning and offer opportunities for provider contracting that are

responsive to community needs and in line with the Authority's Local Provider Network Development Plan with expectations to implement by September 2017.

- 38. In Line 85: Does this mean our current Case Rate-Per Member Per Month Rate or the Encountering Reimbursement Schedule for each individual service per our current contract?**

85 The rate under this RFA will be the existing rate as of May 30, 2016 for each Provider as specified in their current contract with ValueOptions. That rate will be honored up to August 31, 2017 contingent upon availability of funds.

A standard rate for each service will be established, and a new RFA published, for contracts to begin on September 1, 2017.

For case rates, "existing rate" refers to the current case rate per member per month as specified in applicant's contract with ValueOptions; however the number of case rate members will be established during contract discussions. NTBHA will also honor the encounter reimbursement schedule per applicant's current contract. NTBHA will apply payments and complete reconciliations as it is currently done under applicant's current contract with ValueOptions to the extent possible.

- 39. We have been a SPN since 2000. We are proposing to provide substance abuse services which we have not provided previously. We acquired a substance abuse providing agency. Can we propose to provide SA services even though we have not provided these services for 2 years under NorthStar?**

Please refer to Question # 37 above.

- 40. Applicant submitted its application prior to the Notice of Suspension on May 11, 2016. We would like to submit an addendum to the existing application. The original application was hand delivered in hard copy. Is it possible to submit the addendum electronically or will we need to submit it in hard copy as well? Are there any special instructions for the submission of the addendum?**

Applicants may submit the addendum electronically to Brittony McNaughton at bmcnaughton@ntbha.org. If submitted electronically, application addendums must be submitted in PDF format and attached in an e-mail that identifies it as the 'Addendum' to original application. Please include "Addendum RFA#2016-001" on the subject line.

- 41. V. Budget/Financial 288**

A. Attach copies of the Applicant's last three years audited financial reports -- Label as 289 Exhibit V. 290

Per the FAQ, Please submit the last 3 years compiled year end financials or last 3 years of tax returns. Items should be marked proprietary as appropriate.

Our agency can provide the company's Annual Reports for the last three years, but each document is approximately 130 pages long (nearly 400 pages for all three years). Will an excerpt from the annual report be appropriate as long as it covers the financials or should we plan to submit the entire annual report for each year?

Applicant may submit an excerpt from the annual report provided that the document provides adequate information on financials. Applicant must allow an onsite review by NTBHA of additional documents if needed.

42. On the dividers do they have to be Roman Numerals or can they be regular numbers?

The tab dividers should be labeled using Roman Numerals as indicated in the RFA. Clearly designate each item in the document as it appears in the outline provided in the RFA (by number, letter, and question). Place tab dividers at the beginning of each section (Roman Numerals) to match those shown above in the Proposal Outline section of the RFA.

43. We pulled the document apart to put all required information behind each section, does that document have to be double spaced or only our responses?

Please ensure that applicant responses are double spaced, type size at least 10 pitch.

44. What is the plan for fee for the services that presently we are not contracted with VO?

This issue will be addressed through contract discussions.

45. There is indication that SUDs have to be non-profit to apply? Is there a specific section for for-profit providers?

Due to restrictions on the expenditure of Substance Abuse Prevention and Treatment (SAPT) Block Grant funds, all applicants applying to provide Substance Use Disorder services under this RFA must qualify as a public or nonprofit private entity prior to the execution of provider contract. NTBHA will, however, hold a separate Vendor Contract with the Department of State Health Services that will allow for additional contracting with for-profit providers for opioid treatment services. NTBHA plans to release a separate procurement for opioid treatment services provided by private for-profit providers at a later date.

46. Do we need to be a clinical provider to respond to this RFA? If we do not need to be a clinical provider, do we need to have clinical treatment personnel on staff?

This RFA seeks applicants for comprehensive outpatient community mental health services as described in Attachment B and substance use disorder services as described in Attachment C. Applicant must have staff with the appropriate licenses, credentials, certifications, and/or accreditations related to the proposed services.

47. Do we need to have a Medicaid number to apply for this funding?

In order to ensure continuity of services it is preferred that every Applicant be contracted in the networks of Service Area MCOs or have a plan to develop such contracts.

48. We want to begin to offer clinical services in conjunction with our current services. Though we have a long history of providing services for people with substance use and co-occurring (substance use and mental health) disorders, we have not implemented a clinical approach to this point. Are we allowed to propose a new service or does it need to be something that we have offered in the past?

Please refer to Question #37 above.