ANNE ARUNDEL COUNTY MENTAL HEALTH AGENCY, INC.

REQUEST FOR PROPOSALS

FOR

TRANSITION AGE YOUTH PROGRAM
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I. Background:

In March 2000 the Transition Age Youth (TAY) program began in Anne Arundel County. The program initially served ten youth ages 16 through 22 and included social and housing supports. Through a series of budget reductions, the program was no longer able to offer housing supports, but continued to offer social supports to the youth enrolled in the program. The program had an enhancement in 2014 when the University of Maryland in partnership with the Behavioral Health Administration (BHA) trained all the TAY staff in an abbreviated version of the Transition to Independence Process (TIP). The program was also expanded to serve twenty youth ages 16-26. Over the past 14 years, the program has demonstrated that the additional supports that youth receive enhance the transition to becoming a successful adult.

The Anne Arundel County Mental Health Agency (AACMHA) desires to identify a vendor to provide care management services and clinical support that can serve both youth and young adults ages 16 to 26. The offeror must indicate the type of license or certification it has for both youth and adult programs.

II. Program Model:

The Transition Age Youth Program provides a system of care to help youth and young adults smoothly and successfully transition into adulthood. The TAY program is designed to focus on the each consumer as an individual. Attention is centered on the consumer to provide them with positive, appropriate, and culturally-competent services and support that is engaging to them and keeps them involved. The TAY program promotes self-sufficiency, resiliency and encourages success in areas imperative to future well-being. These areas include school based learning, work based learning, experiential learning and connecting youth to local community activities. Flexible funding is available to support many of these activities.

The Anne Arundel County Transitional Age Youth program centers on youth and young adults ages 16-26 with a behavioral health disorder. The TAY program is outcome based and assessments are completed regularly to assess the consumer’s progress. Each TAY participant is assigned a care manager who works with the consumer to tailor the goals of each consumer to help them transition into adulthood. Care managers engage the consumers and, keep them involved and energized every step of the way. Services are always non-stigmatizing, helping to empower the consumer make choices that will improve their future success at being independent.

Care managers promote the consumer’s self-sufficiency while encouraging completion of their goals. Attention is placed on several key areas that are vital to the consumer’s continued well-being. Employment is an integral part of self-sufficiency. Consumers are encouraged and rewarded for seeking employment, as well as, maintaining stable employment. Earning a steady income not only helps the consumers become more independent, it also helps them build confidence and self-worth that carries over into all other areas of their lives. Education is another key area that aids in a consumers move
towards being self-sufficient. Care managers work with the consumer and the schools to make sure that the consumer is attending classes regularly, completing assigned tasks, and moving towards completion of their education. Consumers are not only rewarded for their hard work, but also, help is provided to obtain age-related items and activities that are part of the school experience. Without the assistance of the TAY program and the support of Care managers, the opportunity for these age-related items and activities would be missed. Health issues, both psychological and somatic, are stressed with the consumers. Opportunities to improve the consumer’s health are made available by the Care managers. In addition, Care managers provide assistance to individuals by encouraging the development of social skills. Care managers, through the TAY program, also provide the consumers with age-appropriate activities. These activities help the consumer better interact with the community, build relationships with others, and increase their personal effectiveness and confidence.

While the TAY program’s main focus is youth, the Care Managers also work with the individual’s families and others important to the consumer. The Care Managers working together with others provide a safety net for the consumer. With appropriate releases, the family members are consulted and kept informed throughout the consumer’s involvement with the Transitional Age Youth Program. The TAY program is intended to be an adjunct service, with therapy being the primary service. Goals are determined in conjunction with the youth and family and the team. Monthly contact is maintained between the consumer’s therapist and the Care Manager in order to provide each other with progress updates on goals. Besides the consumer’s family and therapist, Care Managers maintain contact with other service providers imperative to the achievement of the consumer’s goals. For the youth and young adults, services are coordinated between the treatment team and the consumer’s school, as appropriate. Care Managers also assist consumers and the consumer’s family, as needed, in obtaining benefits to help the consumer achieve independence.

The four Pillars of the program are high school completion, employment, college attendance or vocational training, and community integration. The program staff will be expected to enroll and complete training by the University of Maryland.

III. Scope of Work

A. Overview
The Anne Arundel County Mental Health Agency is seeking a single provider to serve the TAY population in Anne Arundel County at or above standards included in the

i. Federal Medicaid requirements and State Medicaid Plan requirements for the type of service.
ii. Meet the requirements of the Anne Arundel County Mental Health Agency, Inc. and
iii. Statements made in the reply to this RFP.
The AACMHA will oversee and monitor compliance with all contract requirements in order to ensure procedural requirements and contract deliverables are met. The offeror shall ensure that the AACMHA will have full access and copies of any and all materials to fulfill this contract oversight role. This should include but is not limited to, consumer records, case ratios, staffing levels and patterns, organizational parameters, service requirements budget and financial records.

B. Overview of Program

The TAY program will serve youth ages 16 to 26, who have been diagnosed with a behavioral health disorder and are actively engaged in behavioral health treatment for at least 6 months prior to admission. The care manager will identify TAY candidates and submit an application packet to the AACMHA liaison. The packet should include a letter from the treating licensed mental health professional indicating the need for TAY services, the youth’s treatment plan or IEP, a cost summary sheet and a narrative to include vocational and educational goals. All individuals in the program shall have Maryland Medical Assistance and the program will request a Value Options authorization for the service they are licensed or certified to provide prior to initiating services. The cost summary sheet worksheet is supplemental to other Value Options authorization procedures. This worksheet does not replace the need to register, enroll and obtain authorizations from Value Options.

The offered shall staff the program with at least a dedicated .75FTE licensed mental health professional (LMHP) and a dedicated .5 FTE care manager. The LMHP shall prepare and submit the new enrollee application to the AACMHA and complete the CANS assessment every 6 months for all enrolled participants. The LMHP, who carries a small caseload of 5 to 6 participants, is also expected to meet with all families and all participants on a quarterly basis as well a monthly phone contact. The care plans should be reviewed by the LMHP to ensure that they are youth and family driven. The care manager will carry a caseload of 14 to 15 participants. Grant funded staff are designed to complement the interaction with the youth that are being billed through the Fee For Service system. This is not a substitution for service.

The care manager will meet with the youth and family in the home or in a mutually agreed upon location at a minimum of 4(four) times a month. At these visits, the care manager and family can evaluate progress on goals and develop strategies with the youth to continue the implementation of the goals. In addition to the youth and family meetings, the program will offer youth groups 2 (two) times per months for all program participants. The groups are related to gaining employment, building relationships, or other skills that could enhance a youth’s skill development. The program will strive for 90% participation in groups.

The care manager will assist and encourage the youth or young adult in developing goals related to education, vocational training, community integration and employment.
Staffing Requirements -

The Staffing for this program includes a dedicated .75 FTE licensed mental health professional and a dedicated .5 FTE Bachelors level Care Manager.

C. Deliverables:

The major outcome for this population is to reduce the use of inpatient and other institutional-based care, obtain and maintain employment, completion of education, youth satisfaction, maintaining entitlement and having a safe, clean, improved overall wellness and stable living situation.

i. Program Wide Deliverables

1. Submit required youth data to the A ACMHA on a monthly basis.
2. Submit fiscal and programmatic reports to the A ACMHA on a monthly basis.
3. Maintain a database of all youth purchase of service requests and receipt verifications and submit to A ACMHA on a monthly basis.
4. Track the number of youth who are employed, in school or college, living independently or in a stable housing situation and highlight any youth achievements or successes.
5. Track the number of youth who are admitted to inpatient psychiatric units Residential Treatment Centers or are arrested.
6. Develop and implement a plan for outreach and recruitment to public and non-public schools, Outpatient Mental Health centers and other PBHS service providers to ensure that providers can refer youth and eligible youth have access to the TAY program.
7. Complete the CANS assessment for every enrolled youth every six months.
8. Develop and implement plans in cooperation with the family and treatment team that are youth driven.
9. Prepare and submit a Bi Annual report and narrative to the A ACMHA on January 10th and July 10th.
10. Attend provider meetings organized by A ACMHA.
11. Meet with the A ACMHA on a monthly basis and as requested by A ACMHA.
12. Notify A ACMHA staff of significant changes with youth, i.e. hospitalization, job changes, arrest, school suspension or expulsion, loss of a job, interruption or change in living situation, within 72 hours of the care manager being notified.
13. Meet with and prepare reports as requested by BHA/CSA
14. Appropriate staff are trained by University of Maryland
15. Appropriate staff receive the CANS training and certification
16. Adhere to staffing ratios
17. Complete monitoring tools as determined by the EBP selected by the Department
IV. MECHANISMS TO INTEGRATE WITH EXISTING SYSTEM

The selected vendor will be required to sign contract with the AACMHA. In this contract, at a minimum, the parties will specifically address collaboration, sharing of information in conformance with applicable laws and regulations, grievances and complaints, dealing with non-compliance of children, youth and families, and consumer and family input into treatment plans. Involvement in hospitalizations and education must be addressed.

V. PROCUREMENT PROCESS

A. Issuing Agency:

   Adrienne Mickler
   Executive Director
   Anne Arundel County Mental Health Agency, Inc.
   1 Harry S Truman Parkway, Suite 101
   Annapolis, Maryland 21401
   410 222-7858

VI. PRE-BID CONFERENCE

A pre-bid conference will be held on Friday, April 10, 2015 at AACMHA Conference Room, 1 Harry S. Truman Parkway, Annapolis, MD 21401. The purpose of the conference is to address questions concerning the expectations of the project. All interested parties should register with the AACMHA by March 27, 2015 via email to mhaaac@aol.com.

VII. CLOSING DATE

The deadline for submission of proposals is 3:00 pm Eastern Daylight Saving Time, Friday, May 15, 2015 at AACMHA 1 Truman Pkwy, Suite 101, Annapolis, MD 21401. Please submit 1 ORIGINAL AND EIGHT (8) COPIES each of both the Offeror Qualifications, Technical Proposals and Budget Analysis.

VIII. DURATION OF OFFER

The Offeror agrees to be bound by its Offeror Qualifications, Technical Proposal and Budget Analysis for a period of 60 days from the proposal closing date during which time AACMHA may request clarification or corrections for the purpose of evaluation. Amendments or clarifications requested by AACMHA shall not affect the remainder of the proposals, but only that portion so amended or clarified.
A. Timetable

If it is deemed appropriate, Offerors submitting proposals in response to this RFP may be required to make oral presentations or negotiations of their proposals. AACMHA will schedule the time and place for such discussions, if any. It is expected that this will take place approximately two weeks after the proposal deadline, depending on the number of proposals received. It is planned that the selection of the contractor will be announced on Monday, June 22, 2015, and a contract will be executed within a week of the announcement. The announcement will also be available to Offerors on the AACMHA website at www.aamentalhealth.org under Latest News. The project will commence on or about Wednesday, July 1, 2015.

B. Cost of Proposal Preparation

Any costs incurred by Offerors in preparing or submitting proposals are the sole responsibility of the Offerors. AACMHA will not reimburse any Offeror for any costs incurred in making a proposal or subsequent pre-contract discussions, presentations, or negotiations.

C. Selection and Ad Hoc Committee

A committee will be formed to review the proposals, score them, and recommend a selection to the AACHMA Board of Directors Contract Committee. Final acceptance of the deliverables will be made by the AACMHA and the AACHMA Board of Directors.

IX. PROPOSAL SUBMISSION

A. Form of Proposal

Proposals must be submitted by each Offeror in separate sealed packages, grouped and marked as follows:

1. Transition Age Youth Program – Technical Proposal
   Offerors name and date of proposal

2. Transition Age Youth Program– Price Proposal
   Offerors name and date of proposal
B. Freedom of Information

Offerors should give specific attention to the identification of those portions of their proposals that they deem to be confidential proprietary information or trade secrets and provide any justification why such material, upon request, should not be discussed by AACMHA under the Maryland Public Information Act, State Government Article, Sections 10-611 et seq. annotated Code of Maryland.

Offerors are advised that the mere assertion of confidentiality is not sufficient to make matters confidential under the act. Information is confidential only if it is customarily so regarded in the trade and/or the withholding of the data would serve an objectively recognized private interest sufficiently compelling as to override the general disclosure policy of the act. In determining whether information designated as such is proprietary, AACMHA will follow the direction provided by the AACMHA attorney when responding to requests for information contained in proposals.

It may be necessary that the entire contents of the proposal of the selected Offeror be made available and reproduced for the purpose of examination and discussion by a broad range of interested parties.

X. PROPOSAL FORMAT & CONTENT

A. Overview

The proposal should address all points outlined in this RFP, and should be clear and precise in response to the information and requirements described. A transmittal letter should accompany the proposal. The sole purpose of this letter is to transmit the proposal. It should be brief and signed by an individual who is authorized to commit the Offeror to the services and requirements as stated in this RFP.

Technical Proposal Format

i. Each Offeror’s submission must bear the Offeror’s name, the closing date for proposals and “Transition Age Youth – Technical Proposal” on the outside of the package. Inside this package (an original and six copies) shall be the Offeror's Technical Proposal.

B. Technical Proposal Content

i. Executive Summary -The Offeror shall condense and highlight the contents of the technical Proposal in a separate section entitled "Executive Summary.” The summary shall provide a description of the objectives of the RFP, the scope of work, the contents of the proposal, and any related issues which should be addressed.
ii. Proposed Services - Work Plan
The Offeror shall provide a detailed discussion of the Offeror's approach, methods, techniques, tasks, work plan for addressing the requirements outlined in the scope of work, and any additional requirements that might be identified by the Offeror.

The Offeror shall fully explain how the proposed services will satisfy the requirements of this RFP. It shall also indicate all significant tasks, aspects, or issues that will be examined to fulfill the scope of work, as well as, include a time-phased schedule by tasks for meeting the proposed objective, a breakdown of proposed staff assignments, and time requirements by task.

The Offeror shall demonstrate a full understanding of the purpose, expectations and complexities of the project and how the objective may best be accomplished. The total scope of effort and resources proposed by the Offeror should be convincing and consistent with the view and nature of the engagement.

iii. Project Organization and Management

The Offeror shall demonstrate the capability to successfully manage and complete the contract, including an outline of the overall management concepts and methodologies to be employed by the Offeror, and a project management plan including project control mechanisms, and describe the quality control procedures of the Offeror. Key management individuals responsible for coordinating with the respective local Core Service agency should be identified. The Offeror must meet periodically with respective local Core Service agency staff and render periodic progress reports for the purpose of administering the contract. The Offeror shall also participate in the consumer tracking process approved by the BHA, collecting and submitting relevant data as required by BHA. The Offeror also shall address the transition and employment of existing agency-based case managers.

iv. Experience and Qualification of Offeror

References and descriptions of previous similar engagements should be provided (All references should include a contact person familiar with the Offeror's work and the appropriate telephone number, with authorization for AACHMA to contact any reference provided). Proof of entity being in good standing, and notification of all lawsuits pending or in process shall be provided. The Offeror must not be listed on the Federal disbarment list. The Offeror shall provide a Medicaid billing number for each service referenced in response to the RFP.
Preference may be given to Minority Business Entity and/or Not For Profit entities. The Offerer shall provide its contact information to include contact name, address, phone and fax number.

v. Personnel Capability

The Offeror shall clearly identify the proposed project team, the assignment of work activities, and the experience, qualifications, and education of the staff to be assigned. It is essential that the Offeror assign and provide sufficient qualified staff assigned in an appropriate mix who has experience in aspects related to the objectives and scope of the proposal. The Offeror should explain to what extent backup professional personnel are available to substitute for loss of professional personnel identified as necessary in the proposal. Continuity of staff is essential needed for consistency with the youth and family.

vi. The Offeror shall have demonstrated knowledge of the Health and Human Services Agreement Manual and demonstrate knowledge of billing Medicaid.

**Price Proposal Criteria**

A. Overview

The price for the TAY contract is $134,560.00. A Minimum of $32,000.00 must be allocated for consumer activities that will assist with consumers’ goal attainment. The remaining $102,560 may be allocated for salary, fringe and operational costs.

The proposal should address all points outlined in this RFP, and should be clear and precise in response to the information and requirements described. A transmittal letter should accompany the budget analysis. The sole purpose of this letter is to transmit the budget analysis; it should be brief and signed by an individual who is authorized to commit the Offeror to the services and requirements as stated in this RFP.

The Offerors must address their financial ability to provide the scope of services requested at the quality desired, and address the legal liability issues associated with the provision of the proposed services. Applicants having current contracts with BHA or Core Service Agencies must have demonstrated success by meeting deliverables in current contracts.

B. Format of Price Proposal

Each offeror is required to submit a Price Proposal which must bear the name of the offeror and the closing date for the proposal.
on the outside of the package. Inside this package (an original and five copies) shall be the offeror’s Price Proposal. For purposes of scoring the price proposal, “offer” is considered to be DHMH grant funds only. The budget in its entirety, including all other revenue, will be considered as part of the technical submission for completion and qualitative elements.

a. Overall Budget

An overall budget (on the appropriate forms) shall be submitted. All sources of revenues anticipated should be detailed in the submitted budget. All anticipated revenue via Fee for Service system should be broken out by procedure type i.e. Case Management, PRP.

b. Personnel Detail Page

A personnel detail page (DHMH 432 D), including the qualifications, license held and titles of staff, the hours/days of employment anticipated, the salary per hour/day, and any agency adjustments should be detailed. There is no allowance for vacancies, work is based on 2080 hours. All consultant costs should be detailed including type of consultant (if known) and an hourly rate for each consultant hired.

c. Start-up Costs

Although there is no funding for start-up costs, start-up costs are anticipated and they should be submitted as a separate budget and supported with supplemental schedules of start-up costs. All equipment and start-up staff and training costs should be detailed on a separate DHMH 432 packet.

d. Collections

Use of, and ability to bill and collect “Medicare, Medicaid, and third party payments” should be documented and identified as described in (a).

e. All other line items- please provide appropriate detail in the narrative to substantiate all budgeted items. i.e. 100 miles per week x 2 employees x 52 weeks at .57 cents per mile = x
f. All line items must reconcile with the information provided in the technical submission. AACMHA reserves the right to terminate the contract at any time if inconsistencies are discovered.

XI. PROPOSAL EVALUATION CRITERIA

A. Overview

An Ad Hoc Committee shall first review any submitted technical portions for compliance with essential technical requirements as expressed in the RFP. Proposals from qualified Offerors will then be studied in depth and evaluated first for technical content without consideration of costs, then for costs. Technical consideration will receive 75% relative weight in the evaluation process and costs will carry a weight of 25% relative weight. Proposals scoring over 80% for the technical proposal, along with the Ad Hoc Committee recommendations, will be forwarded to the AACMHA Contract Committee for review and final determination.

B. Evaluation Method

i. Acceptable Offers

Each member of the Ad Hoc Committee will complete a preliminary technical evaluation. All Offerors who receive a rating of 80% or more of total points possible on the technical proposal evaluation will be considered to have an acceptable offer and will receive consideration of their Price Proposal. The following is the weighted scale for each component:

1. Strength of overall approach 25%

2. Work Plan and approach to deliverables and goals 30%

3. Project organization, management, in-kind service/donations and organizational infrastructure 10%

4. Experience and qualifications 15%

5. Personnel capabilities 20%
ii. Unacceptable Offers

Those proposals with a technical rating of less than 80% of the total possible points will be considered unacceptable and will not be considered further. Their price proposal will not be considered.

iii. Qualification Scores
Relative value will be established by meeting all of the required Offeror qualifications.

iv. Technical Scores

Relative values will be established by the following computation for the technical scores of each of the proposals being considered.

\[
\frac{\text{Average Number of Technical Rating Points - Individual Proposal}}{\text{Average Number of Technical Rating Points - Highest Rated Proposal}} = X
\]

(Technical Score)

v. Price Score

Those proposals that receive a technical relative value score of 80 or higher will be assigned a financial relative score by the following computation:

\[
\frac{\text{Lowest Offer}}{\text{Individual Offer}} = Y \text{ (Price Score)}
\]

vi. Final Score

The individual proposal will then be scored using the formula:

\[
.75x + .25 Y + \text{Final Score}
\]

a. Program Budget/Technical Proposal – Personnel Reconciliation

1. Staff positions in programmatic budget must be outlined and reconciled with technical proposal, citing corresponding page numbers in the technical proposal
2. Salary should be calculated and displayed as both hourly and annual rates with percentage attributed to this project included
3. Specific licenses should be listed for personnel that match the
technical proposal, citing corresponding page numbers in the
technical proposal, e.g. LCSW, LCSW-C, LCPC

c. Revenue must be broken out by CPT code:

<table>
<thead>
<tr>
<th>Example</th>
<th>CPT Code</th>
<th>Revenue</th>
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<tbody>
<tr>
<td></td>
<td>90801</td>
<td>$ 40,000</td>
</tr>
<tr>
<td></td>
<td>90802</td>
<td>60,000</td>
</tr>
<tr>
<td></td>
<td>90791</td>
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</tr>
<tr>
<td></td>
<td>T1016</td>
<td>250,000</td>
</tr>
<tr>
<td></td>
<td>In-kind</td>
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<tr>
<td></td>
<td>Total Budget</td>
<td>$420,000</td>
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XII. CONTRACT REQUIREMENTS

The selected Offeror will be required to enter into a contractual agreement with the AACMHA. A sample contract packet is available at AACMHA for your information. The contents of this RFP and the complete proposal including the budget of the successful Offeror will be incorporated by reference into the resulting agreement. AACMHA shall enter into a contract only with the selected Offeror and the selected Offeror will be required to comply with, and provide assurance of, certification as to certain contract requirements and provisions.
Transition Age Youth Proposal Timeline

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<th>STEPS TO COMPLETION</th>
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<tr>
<td>Advertise/E-mail/webpage</td>
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Register for Pre-Bid Conference
RSVP Jane Murphy at mhaaac@aol.com
before ..........................................................3/27/15

Pre-Bid Conference .............................................4/10/15
10:00 a.m. AACMHA, 1 Harry S. Truman Parkway,
Annapolis, MD 21401 - The Partnership Conference Room

Proposal Submission Deadline .............................5/15/15
Delivered to: AACMHA
   Attn: TAY RFP
   1 Truman Pwky, Suite 101
   Annapolis, MD 21401

Review Committee Packet Pick Up.........................5/18 & 5/19/15

Review Committee meeting at .........................5/29/15
AACMHA, 1 Harry S. Truman Parkway,
Annapolis, MD 21401 - The Partnership Conference Room

Contract Committee meeting 10 a.m. at ...............6/5/15
AACMHA, 1 Harry S. Truman Parkway,
Annapolis, MD 21401 - The Partnership Conference Room

Core Service Agencies Board of Directors’ Approval.......6/19/15
Via email vote

Contract Award Announcement.............................6/22/15
Email/call to successful bidder and notice
to be placed on AAACMHA website

Work to Begin on or about....................................7/1/15