

General Guidance

- 1) "Board" as used hereafter shall mean the Lake County Alcohol, Drug Addiction and Mental Health Services Board and "state" the Ohio Department of Mental Health and Addiction Services.
- 2) The following material outlines general conditions, instructions and specifications for those who plan to submit proposals to sell services to the Lake County Alcohol, Drug Addiction and Mental Health Services Board. These conditions, instructions and specifications have been developed to serve the following purposes: To provide guidelines for the development, structure, content and submittal of service proposals to the Board; To insure the provision of quality services to consumers in Lake County; To provide a basis for service evaluation, effectiveness and compliance with local, state and federal requirements; To target the limited financial resources of the Board to specific consumer populations as identified by the Board's service plan priorities.
- 3) Each Proposer shall submit two (2) full copies of their Proposal. Each Proposal may be submitted in person or mailed to the offices of the Board at One Victoria Place, Suite 205, Painesville between the hours of 8:00 am and 4:30 pm, Monday through Friday. No Proposal will be accepted after **3:00 pm, May 3, 2021.**
- 4) All Proposals shall be analyzed and evaluated by the Board during May & June, 2020. Awarding of contracts for State Fiscal Year 2022 will occur no later than the Board's Annual Meeting currently scheduled for **June 21, 2021.**
- 5) In considering Proposals, the Board generally will be guided by the principle of lowest cost and best quality. In evaluating the merits of a Proposal, the Board will consider issues of service quality, costs and outcomes.
- 6) The Board will entertain proposals to realign existing resources to better meet the needs of consumers in the on-going spirit of recovery. Programs emphasizing evidence based practices and provider collaboration will be given priority status.
- 7) Behavioral health clinical services shall be billed using the Board's Great Office Solutions Helper (GOSH) system and shall be reimbursed based on fee for service. Grant services in which a unit/episode is able to be captured will also be billed and reconciled using the GOSH system. Rates for non-Medicaid services will be set according to the Medicaid ceiling. Non-Medicaid units must be billed by September 30, 2022 for services provided in Fiscal Year 2022.
- 8) Should the successful Proposer be a service provider which has not previously been a contractor with the Board, the Proposer shall provide to the Board immediately upon award of and prior to the signing of the contract, the following:

- a. Articles of Incorporation, By-Laws, Personnel Policies and Employee Grievance Procedures.
 - b. Evidence that the Proposer possess a valid Worker's Compensation Certificate.
 - c. Evidence of insurance coverage including bonding of all persons in the organization who are empowered to receive and disperse funds.
 - d. For a Proposer not previously incorporated, verification of application for incorporation.
 - e. Clients Rights and Grievance Policy and Procedure plan.
- 9) The successful Proposer will be required to execute the contract within ten (10) days after award of the work.
- 10) Failure to comply with any of these instructions may result in rejection of a Proposal or the refusal of the Board to enter into a contract with the successful Proposer.
- 11) The Board reserves the right to reject any and all Proposals.
- 12) A Proposer's meeting will be held via Zoom <https://zoom.us/j/93935447560>, Meeting ID: 939 3544 7560, Passcode: 507796, Dial by phone +1 646 558 8656 on **March 22, 2021 at 2:00 p.m.** for the purpose of answering any questions proposers may have. Participation is not required. Additional Zoom calls may be scheduled as needed.
- 13) These specifications, including all referenced and attached documents, will become part of the final agreement/contract between the Board and the successful Proposers. The Proposer must examine all documents included with this specification and any addenda, and it is understood that all Proposals are based on the Proposer's full comprehension and compliance with stated provisions.
- 14) Laws, Regulations, Rules, Policies and Procedures. Services provided under this proposal and contract shall be in accordance with the following, wherever applicable:
- a. Ohio Revised Code, Chapter 340 et al, and all applicable Ohio Law;
 - b. The Rules, regulations, standards and administrative guidelines of the Ohio Department of Mental Health and Addiction Services including but not limited to:
 - i. State certification standards (Ohio Administrative Code Section 5122)
 - ii. State Board Assurances and Contract Agency Assurances
 - iii. State reporting requirements
 - c. Federal laws and regulations which are applicable, including but not limited to, those concerning non-discrimination in employment and in the provision of services, privacy and security of client information and federal sub-awards;
 - f. The Board's Community Plan (mental health and alcohol/drug addiction);
 - g. The Lake County ADAMHS Board Policies and Procedures;
 - h. The requirements of the proposed contract contained in the Exhibits.
 - i. Reporting requirements listed (Attachment 3).

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

FY2022 PROPOSAL CONTENT

All components of the proposal shall be submitted in the order as follows:

Organizational Overview

- 1) Organizational Structure
 - a. History. This should be a brief sketch of your organization's history and mission.
 - b. Structure. Describe the structure of our organization (e.g. private practice, partnership, incorporated, not for profit, tax exempt, public, for profit). Describe the organization's board structure if it has a board. If it does not have a board, describe any advisory council, committees and/or board that may relate to your operations. If you have a board, include a list of current board members with their current address as Appendix II.
 - c. Table of Organization. Include a table of organization of your agency that identifies and describes all units of the organization and their interrelationships, including administration and all program/service categories.
 - d. Areas of Expertise. Include a list of the areas of expertise of your staff and/or organization – areas of clinical focus (eating disorders, grief counseling, dd, etc.) and areas of special skill (fluent in Spanish, Russian, American Sign Language, etc.)
- 2) State Equal Employment Opportunity Regulations. Proposals shall submit documentation that illustrates compliance with State EEO regulations.
- 3) Health Equity. Health equity means giving patients the care they need when they need it. It is the goal of the Lake County ADAMHS Board to offer high quality, person-centered care that is responsive and appropriate to the needs of all residents of Lake County; care that does not vary in quality because of personal characteristics such as ability and disability, age, gender, ethnicity, educational level, geographic location, race religion, sexual orientation, socio-economic status, and values. Proposals shall include what specific strategies your organization utilizes to ensure health equity is provided to all clients.
- 4) Certification, Accreditation, Licenses, Affiliation. Proposers should describe relevant certification, accreditation, licenses and affiliations which they currently hold or are in the process of obtaining. Also, list the organizations' membership in or affiliation with professional associations. Proposers shall include copies of most recent OMHAS license and certification, and a statement affirming that provider is only requesting non-Medicaid funding for services for which the provider is certified.
- 5) Insurance. Proposers shall secure such insurance as is necessary to meet the requirements outlined in Article 12 of the Board/Provider non-Medicaid contract. Proposers must provide documentation of current insurance.

- 6) Key Contacts. All Proposers shall include a list of names and contact information for key contacts in the agency including but not limited to:
 - a. Executive Director
 - b. Clinical Director
 - c. Business Manager
 - d. Quality Improvement Manager
 - e. Client Rights Officer
 - f. Marketing/Communications Contact
 - g. Non-Medicaid Billing System Contact
- 7) Capital Planning. All Proposers shall describe what steps they take to insure the capital solvency of their organization – how does the organization provide for its ongoing physical/property needs.
- 8) Physical Operations. All Proposers shall describe what steps they will take to improve the efficiency of the physical operations of the agency.

Administrative Operations

- 9) Proposers shall demonstrate how their agency administrative operations and services will address and implement the following components:
 - a. Notice of Privacy Practice. Providers shall distribute the Lake County ADAMHS Board Notice of Privacy Practice to all new enrollees in the Lake County Program. Notices shall be distributed to new consumers at time of intake.
 - b. ADAMHS Board Information. Providers shall distribute the Lake County ADAMHS information to all new consumers in the system. Information shall be distributed at the time of intake.
 - c. Staff Retention. Proposer shall provide to the Board the following information regarding the retention of agency staff:
 - Turnover rate – specifically, the number of employees who have been hired or have left the organization in the past 12 months;
 - Exit Interview Policy – specifically, how many face-to-face exit interviews have occurred in the past 12 months, who was present during those interviews, and what the organization has learned from them;
 - Outcomes – specifically, what actions has the organization taken as a result of the exit interview findings.
 - d. Continuing Education. Proposer shall provide to the Board a plan for adopting an integrated approach to Continuing Education Programs; Proposer shall demonstrate how other Board funded agencies will be invited to participate in Continuing Education Programs offered, in the spirit of cross-training and agency collaboration.
 - e. Marketing and Public Relations.

- i. The ADAMHS Board relies on local voter support for funds that make services in our system possible. That vital support is firmly rooted in our collective ability to build and maintain value in the ADAMHS brand. All selected contract service providers share the responsibility to make clear the connection between the ADAMHS Board and agency initiatives and services. Proposers shall demonstrate compliance with the Lake County ADAMHS Board Marketing and Public Relations Protocol (Attachment 11).

Fiscal Guidance

10) Proposer shall describe how the organization will incorporate/comply with the Lake County ADAMHS Board's fiscal indicators, including:

- a. Administrative Overhead. Proposers shall explain what percentage of their overall budgets will be attributed to administrative overhead, and what makes up their administrative overhead. Administrative Overhead shall be defined as: Personnel and non-personnel costs that benefit the agency as a whole and cannot be allocated to a specific service or services. Proposers shall describe what steps will be taken to reduce the agency's Administrative Overhead.
- b. Audit: The Provider shall submit to an annual financial compliance audit conducted by an independent auditor who is a certified public accountant as described in the Board/Provider non-Medicaid service contract. A copy of the most recent audit shall be included as Appendix III.
- c. Fee Schedule. Proposers shall insure that services are available and accessible to persons regardless of financial status. Proposers shall include the organization's fee schedule, consistent with Lake County ADAMHS Board established fee schedule, in Appendix IV. Board Fee Schedule is listed as Attachment 4.
- d. Uniform Cost Report Budget. Each Proposer must complete a Uniform Cost Report budget or other template identified by provider. This budget report should reflect the proposed budget for the entire agency including each service for which a proposal is being submitted for the entire fiscal year. The report must include each service proposed, how a unit is defined, number of FTEs and personnel costs for direct service staff, FTEs and personnel costs for support staff, Non-personnel costs, allocation of administrative overhead, calculated cost per unit, un-allowable costs, total allowable costs, and allowable cost per unit. All allowable costs must comply with federal and state laws.
- e. Grant Revenue and Grant Expense. Each Proposer must complete a Grant Revenue and Grant Expense budget detailing revenue and expenses for each grant program by line item categories. Each individual program expense budget shall include a narrative detailing what is included in each line item.

- f. Purchase of Service (POS). Each Proposer shall submit a proposed number of units, per diem, or episode per program along with the proposed total amount of funding being requested. This request should also include billing codes for each program to be billed.

Clinical/Quality Guidance

11) Proposer shall describe how the organization will incorporate/comply with the Lake County ADAMHS Board's clinical and quality indicators, including:

- a. ADAMHS Board Strategies/Goals. Proposer shall describe how the organization will incorporate the current Lake County ADAMHS Board Strategies/Goals into their FY22 operations. Include formal affiliation agreements your organization has established in Appendix I.
- b. Recovery Oriented Systems of Care and Coordinated Centers of Excellence. Providers will describe how their agencies incorporated the Recovery Oriented Systems of Care and the Coordinated Centers of Excellence Best Practice Models in service provision during the previous fiscal year and plans for the next.
- c. Priority Populations. The Board has identified priority populations which are listed in Attachment 8. These priority populations are to be the primary target recipients of Board-funded services. Proposers are advised of the Board's intent to consider services to the priority populations as highest priority. Efforts to target or tailor services to these groups should be described and progress achieved toward last fiscal year's goals reported.
- d. Compass Line. Each Proposer must abide by the Compass Line Policy as described in Attachment 6.
- e. Quality Improvement Proposer's Quality Improvement Plan shall be congruent with the Board's Quality Improvement Plan (Attachment 7). The Board's Quality Improvement Plan is subject to change, and agencies shall implement any changes necessary in order to maintain congruence with the Board's Quality Improvement Plan. The Board will inform contract service providers of any changes in the Board's Quality improvement Plan and Providers will have sixty (60) days to implement any changes outlined in the Board's Quality Improvement Plan.

12) Provider Continuing Quality Improvement.

- a. Proposer shall establish and implement a Quality Improvement Program, as required by the Lake County ADAMHS Board and the Ohio Department of Mental Health and Addiction Services. Proposer shall submit a Quality Improvement Plan with accompanying policies, procedures and forms.
- b. Proposer shall specify a staff member who will be responsible for development, implementation, coordination and oversight of the Quality

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

- c. Proposer shall report Quality Improvement activities at least annually to the Board. To ensure that each agency currently under contract with the Board has developed and implemented a Quality Improvement Program, the Evaluation and Quality Improvement Committee of the Board shall review and make recommendations regarding Quality Improvement Plans of contract agencies. Reviews shall be conducted annually for all current contract agencies.

13) Wait Times. All Proposers shall provide current data regarding wait times for access to all board funded services, and shall describe the development and implementation of a wait time management mechanism. Specifically, Proposers shall describe steps taken to reduce/eliminate wait times and enhance service delivery to consumers. Proposers shall include, as appropriate:

- a. Wait time from first contact to schedule intake/diagnostic assessment until actual intake appointment
- b. Wait time from first contact to schedule first E & M (Evaluation and Management) service until actual appointment
- c. Wait time from first contact to schedule first counseling appointment until actual appointment
- d. Wait time from first contact to schedule first Community Psychiatric Supportive Treatment appointment until actual appointment
- e. Other

14) Crisis Intervention Service. All Proposers shall have established formal affiliation agreements with other agencies for crisis intervention services if the individual agency does not provide crisis intervention service itself. Proposals may be rejected until such agreements have been developed and effected. Agreement must be dated in current year.

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

Program Narratives

16) A Proposer may submit Proposals for one or more of the services listed on the Proposal Form. The Board will consider each service Proposal separately. The Board may accept and contract for the total amount of services listed by a Proposer on the Proposal Form or for a portion thereof. **For each service proposal, Proposer shall submit (1) Cover Sheet (Attachment 1), (2) Service Specifications/Program Narrative, and (3) Program Summary (Attachment 2).**