

**MACOMB COUNTY COMMUNITY MENTAL HEALTH SERVICES
REQUEST FOR PROPOSAL:**

CLS & RESPITE SERVICES

OVERVIEW:

Macomb County Community Mental Health Services (MCCMHS) announces a Request for Proposal (RFP) from qualified vendors/providers to provide Community Living Support (CLS) services and/or Respite Care services to individuals presenting with Developmental Disabilities, Adults with Mental Illness and/or Children with Serious Emotional Disturbance in Macomb County. The selected provider(s) must have the organizational capacity to provide either Community Living Supports and/or Respite Care services to a minimum of at least fifty (50) consumers per month, per year, and as stipulated in each consumer's Individual Plan of Service. The CLS & Respite Provider (s) shall have a minimum of two (2) years experience in working with individuals with developmental disabilities or children with serious emotional disturbance. Vendor/provider must be able to begin services and accept new referrals, based on consumer choice, on or after January 1, 2018.

CONSUMER REQUIREMENTS/DESCRIPTION:

The consumers served with Community Living Supports and/or Respite services must reside in a community setting and be Medicaid eligible and currently enrolled. Community Living Support and Respite Care service delivery will involve three distinct consumer populations. The vendor shall describe competency and history of service delivery with any or all of the populations. Bidder proposals should specify the population type the program is intending to serve as follows:

- Individuals with Developmental Disabilities.
- Adults with Mental Illness.
- Children with Serious Emotional Disturbance

COMMUNITY LIVING SUPPORTS:

For the purpose of this Request for Proposal, these services are the supports identified in the Individual Plan of Service and are provided either in the home or in the community (when community integration is an identified goal). Community Living Supports (CLS) facilitate an individual's independence, productivity and promote inclusion and participation. The CLS services are assisting, prompting, reminding, cueing, observing, guiding and /or training in areas which may include: gaining independence, skill development related to activities of daily living (ADL's) such as bathing, eating, dressing, personal hygiene, household chores, shopping

for food and other necessities of daily living, money management, transportation (excluding to and from medical appointments that are the responsibility of Medicaid through DHHS or health plan) to and from community activities and safety skills; promotion of mobility; sensory motor, communication, socialization, and relationship building skills; participation in leisure and community activities. These support services may serve to reinforce skills or lessons taught in school, therapy or other settings, but are not intended to supplant services provided in school or other settings. The support services may be provided directly to, or on behalf of, the consumer thus enabling the consumer to attain or maintain their maximum potential. Natural supports should **always** be utilized before CLS services are requested/authorized. Evidence of Michigan Health and Human Services (MDHHS) Home Help Services being requested must be presented before CLS services are authorized. Transportation is included in the CLS rate and may not be billed separately. Community Living Supports are a service delivered in 15 minute unit(s) and per diems as identified as follows:

Community Living Supports (HCPCS Code: H2015)
Staffing ratio of one staff person to one consumer.

Community Living Supports (HCPCS Code: H2015 TT)
Staffing ratio of one staff person to two consumers.

Community Living Supports (HCPCS Code: H2015 TT + TT)
Staffing ratio of one staff person to three consumers.

Community Living Supports (HCPCS Code: H0043 TF)
Consumers receiving 3-10 hours of CLS services per day.

Community Living Supports (HCPCS Code: H0043 TF TT)
Consumers receiving 3-10 hours of CLS services per day in a shared living arrangement.

Community Living Supports (HCPCS Code: H0043 TG)
Consumers receiving more than 10 hours of CLS services per day.

Community Living Supports (HCPCS Code: H0043 TG TT)
Consumers receiving more than 10 hours of CLS services per day in a shared living arrangement.

RESPITE CARE SERVICES:

For the purpose of this Request for Proposal, Respite care services are provided on an intermittent or short term basis and are intended to relieve the beneficiary's family or other primary caregiver (s) from daily stress and care demands during times when they are providing unpaid care. "Short term" means the Respite

service is provided during a limited period of time e.g. a few hours, a few days. “Intermittent” means the Respite service does not occur regularly or continuously. Natural supports should **always** be used first before Respite services are requested/authorized. Respite services can stop and start repeatedly or with periods in between. Respite care services do not supplant or substitute for community living supports or other services of paid support/training staff.

Respite Care Services (HCPCS Code: T1005)
Staffing ratio of one staff person to one consumer.

Respite Care Services (HCPCS Code: T1005 TT)
Staffing ratio of one staff person to two consumers.

Respite Care Services (HCPCS Code: T1005 TT + TT)
Staffing ratio of one staff person to three consumers.

RESPONSIBILITIES:

- The CLS & Respite Provider(s) shall be able to demonstrate knowledge of and experience with Medicaid rules and regulations.
- The CLS & Respite Provider(s) shall be able to demonstrate competency and knowledge of the Michigan mental health system in relation to MCCMHS.
- The CLS & Respite Provider(s) shall demonstrate knowledge of Person-Centered Planning processes and principles.
- The CLS & Respite Provider(s) shall engage in the development of relationships with the consumer in his/her community.
- The CLS & Respite Provider(s) shall utilize creative and innovative means to meet the needs of each individual consumer and shall understand the flexible array of mental health services available to consumers.
- The CLS & Respite Provider(s) shall support consumers and/or family controlled service arrangements as required to successfully reach the consumer’s goals and objectives.
- The CLS & Respite Provider(s) shall explore, and when possible, develop resources available in the community to benefit an individual consumer in meeting identified goals and objectives.
- The CLS & Respite Provider(s) shall implement flexible staffing patterns to best meet the needs to the consumers.
- The CLS & Respite Provider(s) shall employ staff who are knowledgeable of behavioral plans and have the ability to handle behavior problems with a challenging population.

GENERAL ADMINISTRATIVE FUNCTIONS:

- The CLS & Respite Provider(s) shall comply with all privacy and security standards as stipulated by the Health Insurance Portability and Accountability Act (HIPAA) of 1996.
- The CLS & Respite Provider(s) shall comply with all Federal and Michigan Laws, regulations, and the Michigan Administrative Code, the Michigan Mental Health Code, and the MDHHS contractual obligations.
- The CLS & Respite Provider(s) shall assure that all policies and procedures comply with requirements of MCCMHS and the MDHHS.
- The CLS & Respite Provider(s) shall be responsible to be knowledgeable of eligibility for services and resources to consumers as referrals for such services resources are necessary.

FISCAL MANAGEMENT RESPONSIBILITIES TO MCCMHS:

- The CLS & Respite Provider(s) shall employ competent, qualified financial staff to ensure the delivery of quality services and accurate clinical service record recording.
- The CLS & Respite Provider(s) shall ensure all financial statements and practices conform to Generally Accepted Accounting Principles.
- The CLS & Respite Provider(s) shall have a system in place of internal controls to safeguard the assets of the organization. These controls shall be evaluated a minimum of once every two (2) years by a licensed, qualified Certified Public Accountant. Internal controls must be in accordance with Generally Accepted Accounting Principles established in the United States of America.
- The CLS & Respite Provider(s) shall purchase and maintain liability insurance to protect the interests and obligations being delegated by MCCMHS. The limits of such coverage are outlined in the contract boilerplate language.
- The CLS & Respite Provider(s) shall have a solid financial foundation and have demonstrated sound fiscal practices for several years.

INFORMATION SUPPORTS RESPONSIBILITIES TO MCCMHS:

The CLS & Respite Provider (s) shall have an existing system or will have a system in place by January 1, 2018 to fulfill the following functions:

- Processing and tracking service delivery data and consumer demographic data.
- Stable and reliable system for timely processing of service claims.
- Provider shall have a written development plan designed to accommodate electronic data standards for:
- Claim/Encounter processing - ANSI-837

- Enrollment - ANSI-834
- The CLS & Respite Provider(s) shall have policies and procedures in place, including a service delivery and organizational environment, that protects consumer data from unauthorized review.
- The CLS & Respite Provider(s) shall utilize and participate in the MCCMHS FOCUS data system for claims submission.

QUALITY MANAGEMENT RESPONSIBILITIES TO MCCMHS:

- The CLS & Respite Provider(s) shall assure that provided services are documented in the consumer's record as required by the MDHHS and the Centers for Medicare and Medicaid Services.
- The CLS & Respite Provider(s) shall assure that staff employed by the provider receives initial and ongoing education in person-centered planning, behavior management, crisis management, language proficiency, cultural competency, grievances and appeals, and recipient rights.
- The CLS & Respite Provider (s) shall have the capacity to meet the reporting requirements of MCCMHS as outlined in the MCCMHS contract with the MDHHS.

MCCMH SERVICES OBLIGATIONS TO THE PROVIDER:

- MCCMHS will designate a contract manager and financial staff who both act as the primary points of contact to support the Specialty Services contract with MCCMHS.
- MCCMHS will offer provider profile information describing paneled providers to individuals with developmental disabilities and the families with children having serious emotional disturbance for the purpose of choice in selecting provider of services. The consumer will have an opportunity to review profile information and make a decision about where he/she would like to apply for services.

RECIPIENT RIGHTS RESPONSIBILITIES:

- The CLS & Respite Provider(s) shall comply with all Recipient Rights provisions as described in the Michigan Mental Health Code, the MDHHS Administrative Rules, MCCMHS' contract with MDHHS and policies of MCCMHS.
- The CLS & Respite Provider(s) shall take steps to ensure consumers will be protected from rights violations while receiving mental health services.
- The CLS & Respite Provider(s) shall assign a Recipient Rights Coordinator to ensure that staff are trained in Recipient Rights and that consumers are/or families are informed of rights guaranteed by the Michigan Mental Health Code. All training for recipient rights must be provided by the

MCCMHS' Office of Recipient Rights. Initial training and bi-annual training for recipient rights **must** be completed face-to-face.

- The CLS & Respite Provider(s) shall make available to all employees, staff and consumers and/or families, and shall post in a conspicuous location the following:
 - A summary of all rights guaranteed by the Mental Health Code.
 - Instructions on how to contact MCCMHS' Office of Recipient Rights.
 - The MDHHS'/Office of Recipient Rights reporting requirements poster for staff.
 - Provide for unrestricted access to Rights Compliant forms and "Your Rights" booklet to consumers, families and others.

REPORTING REQUIREMENTS:

The successful bidder must be able to meet MDHHS' and MCCMHS' reporting requirements within established guidelines, must be HIPAA (Health Insurance Portability & Accountability Act of 1996) compliant, and must be able to submit electronic service claims data to MCCMHS in the required format. General reporting requirements include, but are not limited to, the following:

- 1) Consumer Quality Indicators and Consumer Satisfaction Measures as required by MDHHS and MCCMHS
- 2) Consumer demographic data as required by MDHHS and MCCMHS
- 3) Consumer encounter/claims data
- 4) Performance indicator consumer data for each quarter
- 5) Independent reviews and/or audits
- 6) Annual Quality Report and Annual Compliance Report in compliance with the contract

CONTENT OF PROPOSAL:

1. Bidders Qualifications and Experience: Overview of the vendor organization, the location of the office from which the work on this project is to be performed, the number and nature of the staff to be employed for the provision of services, and the type of technology systems the organization has in place. The bidder should describe any qualifications and/or experience and/or demonstrated competency specifically related to RFP service type and population type. The bidder must also submit the following information:

- MCCMHS' Provider Profile Application
- Annual audited financial statement for the past two years, if any
- Provider's credit history and credit report
- Criminal background check of the vendor's principal staff

- Reference to any litigation involving the vendor during the past five years
 - Reference to any “substantiated” Recipient Rights violations by the provider or principal staff over the past five years.
 - Provide a copy of their Corporate Compliance Plan as mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
2. Description of Scope of Work: The proposal should describe a work plan indicating the CLS & Respite Provider(s) approach that will accomplish the specific tasks outlined in the RFP. The bidder should describe the philosophy that will be utilized, along with the interest and capacity to meet the requirements outlined in this RFP. The bidder’s approach must include an explanation of the system that will be utilized to perform the requested services.
 3. Identification of Anticipated Problems: The proposal should identify and describe any anticipated or potential problems, the approach to resolving these problems and any special assistance that will be requested from MCCMHS.
 4. Conflict of Interest: The CLS & Respite Provider (s) should identify any potential conflict of interest that exists in regard to the service provider’s ability to respond to this Request for Proposal. This includes a description of their relationship to MCCMHS or any of its agents/agencies, together with a statement explaining why such relationships do not constitute a conflict of interest relative to performing the service outlined in the proposal.
 5. The CLS & Respite Provider (s) Assurance: The selected Provider(s) will be required to assume responsibility for all services offered in their proposal. The bidder must agree not to discriminate against employees or applicants for employment on the basis of race, religion, color, national origin or handicap.

FEE FOR SERVICES:

MCCMHS will provide information related to service fees during the informational bidders meeting. Proposals submitted with rates equal to the MCCMHS pre-established fee for service rates, and/or rates submitted below the pre-established rates will be considered for thorough review. **Any and all proposals submitted with rates above the MCCMHS pre-established service rates will be rejected.**

PROPOSAL EVALUATION:

Submitted proposals will be evaluated in the following areas by the MCCMHS' Procurement Review Committee:

- Experience, Expertise, Staff Training & Development
- Service Provision
- Contract Compliance/Accreditation
- Finance/Staff Cost
- Thoroughness of Proposal

In addition, the MCCMHS' Procurement Review Committee will also review:

- The number and scope of conditions, if any, attached to the bid
- Whether the bidder is presently in default to MCCMHS for any reason
- The number and scope of recipient rights complaints and/or corporate compliance issues associated with the bidder and/or the bidder's parent organization

N.B. Please be advised that ALL information submitted in response to public Request for Proposals 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.