

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

**OVERVIEW:**

Macomb County Community Mental Health Services (MCCMHS) announces a Request for Proposal (RFP) for **Residential Services** from qualified vendors to provide Residential services to adult (age 18 and above) consumers with Developmental Disabilities and/or Serious Mental Illness. For adult residential consumers, they will be provided with an opportunity to live in a setting which is as independent as possible with proper support. Residential services support the consumer in transitioning through various stages of independence and assist the consumer in realizing their readiness for expanded personal responsibility and increased independence.

The Residential provider will be expected to operate a four (4) to six (6) bed State-licensed Community Living Facility (CLF) in Macomb County for adult consumers who are diagnosed with Developmental Disabilities and/or serious mental illness. The physical structure is leased separately by MCCMHS to an independent, non-affiliated landlord. The successful bidder will staff and operate the facility as well as obtain appropriate State of Michigan Certification and Licensing.

The provider should be prepared to provide residential accommodations, personal care as prescribed, 24 hour supervision, in-home skill building assistance, leisure time/recreational activities, supportive services, vocational training, educational, work activity programs, evaluation, job training competitive employment, budgeting personal finances, shopping for groceries, cooking, paying bills, washing clothes, etc. and/or suitable habilitative/rehabilitative programs related to each consumer's person-centered plan. Adult residential consumers must be able to self-medicate without assistance but, perhaps, with prompting. As the residents' progress improves, they may be referred to less restrictive, more independent living situations.

MCCMHS is **not** re-bidding its current provider panel; existing providers who desire to expand their program are welcome to bid. MCCMHS is seeking to expand its current panel of adult Residential providers.

Bidders **must** be familiar with employer/employee contractual relationships, Medicaid Provider Agreements, and other requirements found in federal regulations (42 CFR 431.107).

Bidders must also be prepared to provide a copy of their Corporate Compliance Plan as mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). A "Keys to Developing a Regulatory Compliance Plan" is enclosed. Bidders, if selected to contract, must be prepared to submit the MCCMHS "Provider Information Disclosure Request" form (see enclosed). The completion of this form is **not** required as part of the RFP submission process. It is required as part of the contractual process.

Bidders must acknowledge any relationship between the bidder's principal officers and board members and any member of MCCMHS (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 or any member of the Office of the Macomb County Executive.

### **CONSUMER DESCRIPTION:**

Adult consumers will be diagnosed with developmental disabilities and/or serious mental illness. All of these consumers will be psychiatrically stable but may have some persistent symptoms requiring assistance with management such as having hallucinations and/or delusions. Their behavior history may include impulsivity, verbal aggression, moderate to high physical aggression, unauthorized leaves from the hospital or placement, self-injury, and/or inappropriate sexual behavior.

### **PROGRAM GOALS:**

For adult residential consumers, the goals include allowing consumers to live in the least restrictive environment within their community, while maximizing each consumer's level of independent functioning. These programs are intended to be flexible enough to assist each individual's hopes and desires to be realized. These programs will address the needs of a consumer who may be unable, due to their current need for supervision, to participate in traditional employment, but who may be working towards maximizing their opportunities in the community through in-home programming, community activities, and/or psychosocial rehabilitation services. The residential facility will need to incorporate flexible staffing patterns, knowledgeable staff to deal with behavioral problems, and in-house activities that will assist the consumers in attaining greater independence. Bidders may also want to consider providing nursing care services to address consumers who may be medically compromised.

### **PROGRAM STRUCTURE:**

Referral to the residential program will come from the MCCMHS Access Center (which authorizes services) and/or the MCCMHS Case Management agencies. The Case Management agencies will facilitate the person-centered plan and provide the coordination for all needed services. As indicated in the person-centered plan, the Case Management agencies will arrange for Psychiatric services, therapy services, Nursing services, Psychological consultation, and Behavioral Management Review Committee. The Case Management agencies have the responsibility of training the residential staff what the person-centered plan identifies. The contractor will provide staffing and programming to the consumer according to MCCMHS standards and negotiated contract language. Staffing will also be in accordance to the needs of the consumer which will be identified in the consumers' person centered plans. Satisfying the requirements of Adult Foster Care licensing and Department of Labor and Economic Growth (formerly the Department of Consumer and Industry Services) certification are joint activities between the contractor and MCCMHS.

## **RESPONSIBILITIES:**

- The Residential provider shall be able to demonstrate knowledge of and experience with Medicaid rules and regulations.
- The Residential provider shall be able to demonstrate competency and knowledge of the Michigan mental health system in relation to MCCMHS.
- The Residential provider shall demonstrate knowledge of Person-Centered Planning processes and principles.
- The Residential provider shall engage in the development of relationships with the consumer in his/her community.
- The Residential provider 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 Residential provider shall support consumers and/or family controlled service arrangements as required to successfully reach the consumer's goals and objectives.
- The Residential provider shall explore, and when possible, develop resources available in the community to benefit an individual consumer or a group of consumers in meeting identified goals and objectives.
- The Residential provider shall provide in house activities which will assist consumers in achieving greater independence.
- The Residential provider will make available leisure/recreational activities based on the needs of the consumers.
- The Residential provider shall implement flexible staffing patterns to best meet the needs to the consumers.
- The Residential provider shall employ staff who are knowledgeable and behavioral plans and have the ability to handle behavior problems with a challenging population.

## **GENERAL ADMINISTRATIVE FUNCTIONS:**

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

## **RESIDENTIAL PROVIDER REQUIREMENTS:**

- The Residential Provider should have a minimum of two (2) years' experience in working with individuals with developmental disabilities and/or serious mental illness in providing residential services.
- The Residential Provider must have the organizational capacity to provide the services described in this RFP.
- The Residential Provider must be able to begin services and accept new referrals based on consumer choice no later than January 1, 2018. It is anticipated that MCCMHS will be able to identify potential consumers by or before mid-December 2017. If the residential provider cannot provide all of the services outlined in this RFP by January 1, 2018, they should submit a timeline for a plan for full implementation.

## **FISCAL MANAGEMENT RESPONSIBILITIES TO MCCMHS:**

- The Residential Provider shall have a solid financial foundation and have demonstrated sound fiscal practices for several years.
- The Residential Provider shall provide proof of current liability insurance to protect the interests and obligations being delegated by MCCMHS.

## **INFORMATION SUPPORTS RESPONSIBILITIES TO MCCMHS:**

- The Residential Provider shall have policies and procedures in place, and an environment that protects consumer information.
- The Residential Provider shall utilize and participate in the MCCMHS FOCUS data system for claims submission.

## **QUALITY MANAGEMENT RESPONSIBILITIES TO MCCMHS:**

- The Residential Provider 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 Residential Provider shall support and assist MCCMHS to evaluate, on an annual basis at minimum, the competency and training of staff employed by the provider.
- The Residential Provider shall assure that staff employed by the residential provider receives initial and ongoing education in person-centered planning, behavior management, crisis management, language proficiency, cultural competency, grievance and appeals and recipient rights.
- The Residential Provider shall possess licensure or certification as needed and/or required and accreditation by a nationally recognized accreditation organization.
- The Residential Provider shall have the capacity to meet the reporting requirements of MCCMHS as outlined in the MCCMHS contract with the MDHHS.

## **RECIPIENT RIGHTS RESPONSIBILITIES:**

- The Residential Provider 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 Residential Provider shall take steps to ensure that consumers will be protected from rights violations while receiving mental health services.
- The Residential Provider 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 Recipient Rights training and bi-annual training for Recipient Rights **must** be completed face-to-face.
- The Residential Provider 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 Michigan Mental Health Code.
  - Instructions on how to contact the MCCMHS' Office of Recipient Rights.
  - The MDHHS' Office of Recipient Rights reporting requirements poster for staff.
  - Provide for unrestricted access to Rights Complaint 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. Organization's Qualifications and Experience: Overview of the Residential Provider organization, the number and nature of the staff to be employed for this project, and the type of technology systems the organization has in place. The Residential Provider should describe any qualifications and/or experience and/or demonstrated competency specifically related to residential programs and/or providing services to individuals with developmental disabilities and/or the severely mentally ill. The Residential Provider should describe the composition of their Board of Directors and principal staff. The Residential Provider should also provide a detail of the following:
  - MCCMHS Provider Profile Application
  - Annual audited financial statement for the past two years, if any.
  - Criminal background check of the organization's principal staff.
  - Reference to any litigation involving the organization during the past five years.
  - Reference to any "substantiated" Recipient Rights violations by the organization of principal staff over the past five years.
2. Description of Scope of Work: The proposal should describe a work plan indicating the Residential Providers approach that will accomplish the specific tasks outlined in the RFP. The Residential Provider should describe the philosophy that will be utilized, along with the interest and capacity to meet the requirements outlined in this RFP. The Residential Provider'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 Residential Provider should identify any potential conflict of interest that exists in regard to the residential 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. Residential Provider Assurances: The selected Residential Provider(s) will be required to assume responsibility for all services offered in their proposal. The Residential Provider must agree not to discriminate against employees or applicants for employment on the basis of race, religion, color, national origin or handicap.
6. Costing of Residential Services: The Residential Provider must provide their proposed unit (per diem) rate for the following:
  - H2016 – Comprehensive Community Support Services in the Residential setting
  - T1020 – Personal Care Services in the Residential setting

*The Residential Provider must also be prepared to justify (by means of comprehensive budget figures) their proposed H2016 and T1020 rates.*

## **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

\* It is the expectation that residential providers are accredited by a nationally recognized organization or are in the process of obtaining accreditation

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

- 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.*