REQUEST FOR PROPOSALS:
Opioid Treatment Program (OTP) Hub Project

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Pre-Proposal Conference: November 15, 2018
Proposal Due: December 3, 2018
Anticipated Award Notification: December 27, 2018
Anticipated Contract Start: January 7, 2019

Issued by:
Behavioral Health System Baltimore, Inc.
100 South Charles Street, Tower II, 8th Floor
Baltimore, Maryland 21201
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REQUEST FOR PROPOSALS

Opioid Treatment Program (OTP) Hub Project

I. Overview of the Project

A. Overview of BHSB

Behavioral Health System Baltimore, Inc. (BHSB) is a non-profit agency established by Baltimore City to manage the City’s public behavioral health system. As such, BHSB serves as the local behavioral health authority for Baltimore City. In this role, BHSB envisions a city where people live and thrive in communities that promote and support behavioral health and wellness.

BHSB is committed to enhancing the behavioral health and wellness of individuals, families, and communities through:

- The promotion of behavioral health and wellness prevention, early intervention, treatment, and recovery;
- The creation and leadership of an integrated network of providers that promotes universal access to comprehensive, data-driven services; and
- Advocacy and leadership of behavioral health-related efforts to align resources, programs, and policy.

BHSB is committed to promoting behavioral health equity in Baltimore City by ensuring that the behavioral health provider network is culturally and linguistically responsive to the diverse populations served; reducing behavioral health care access barriers for populations known to experience discrimination and marginalization; and supporting communities directly to develop services that are responsive to their unique strengths and needs.

B. OVERVIEW OF PROJECT

Through this Request for Proposals (RFP), BHSB is seeking a qualified Opioid Treatment Program (OTP) to serve as the hub for this Hub and Spoke project, which is a continuation of BHSB’s Baltimore Buprenorphine Initiative (BBI). The Hub and Spoke model was originally developed in Vermont based on chronic disease management principles. This treatment model seeks to change the delivery of medication-assisted treatment in traditional opioid treatment program settings. Individuals with opioid use disorders can initiate treatment at the hub, which then collaborates with other providers and systems to coordinate care, particularly for people at high risk of negative outcomes including overdose.
The ‘Hub’ site offers low-threshold, intensive, on-demand buprenorphine induction and stabilization. This model also offers peer support services for treatment engagement, counseling, and health integration. Once individuals are deemed stable, they can be referred to a ‘Spoke’ provider. The Spoke provider is a community care provider that is willing to manage and monitor the individual’s buprenorphine treatment. A community care provider can be a Primary Care, Infectious Disease, Psychiatrist, or any provider that is waivered to prescribe buprenorphine, knowledgeable of the disease model of addiction and is willing to work within this integrative model of care.

BHSB developed this project in collaboration with the Maryland Department of Health’s Behavioral Health Administration (BHA) and local stakeholders to expand medication assisted treatment, particularly buprenorphine. The specific goals of this project are to:

- Offer treatment on demand by minimizing barriers to treatment, such as limited induction times or lack of transportation,
- Use an individualized and whole person approach to opioid use disorder treatment, including health integration principles, case management, counseling services, and peer support, and
- Increase the participation of community-based Spoke providers in managing and monitoring buprenorphine treatment for ongoing maintenance.

BHSB analyzed data trends from Baltimore City Health Department Overdose Alerts and other data sources to determine the ideal location for the Hub provider based on greatest need, which is in the southwest region of Baltimore City (zip codes 21216, 21217, 21223, 21229, 21230). Preference will be given to OTPs that are either located in this area or serve very high rates of residents from this area.

See the map on the next page that shows OTPs in relation to spikes in overdoses for fiscal years 2016-2018.

The OTP selected through this RFP will be expected to work closely with BHSB to implement and plan this project, including how to improve and sustain service delivery in subsequent years. BHSB intends to continue partnering with BHA to identify funding to support ongoing operations of this project beyond FY 19, and the selected OTP will be involved in this planning.
Opioid Treatment Programs in relation to Spikes in Overdoses in Baltimore City 2016 - 2018

Legend

OTP Programs

Baltimore City Line

Number

0

2 - 3

4 - 7

8 - 11

Source: Agreement to Cooperate Provider Listing 10/2018- BHHSB & SAMHSA (n=29)
C. SCOPE OF SERVICE

The OTP provider selected through this RFP process will work closely with BHSB to develop a central hub, establish collaborative relationships with organizations that will serve as Spokes, and coordinate a learning collaborative with the Spoke organizations. The Hub will be expected to establish and maintain bilateral relationships with Spoke providers to prescribe and monitor buprenorphine along with coordination of care.

The selected OTP will be expected to provide:

- High quality on-demand buprenorphine induction and stabilization services,
- Expanded induction hours, including weekend and evening hours,
- Person-centered treatment and support services, including counseling, case management, and peer support,
- Health Integration that expands nursing capacities to include medical care coordination, health education, and other nursing duties that promote wellness,
- Coordination of a Learning Collaborative that offers guidance and technical assistance to Spoke providers by reinforcing best practices of buprenorphine treatment and maximizing level of coordination to promote consumers’ recovery with buprenorphine, and
- Relevant and innovative technological advances in the delivery of services in the Hub program.

Maintaining active consumer engagement in treatment is a critical component of this project. It is recognized that people with opioid use disorders who are in early stages of change (e.g., pre-contemplation or contemplation) may have particular difficulty remaining engaged. The selected OTP Hub provider will need to be prepared with interventions targeted to this group, such as contingency management techniques.

The selected Hub provider will be expected to enroll a target of 75 consumers over the six-month service term, with an expected 1-5 new consumers per week.

D. TARGET POPULATION

This project is designed for adults with opioid use disorders who are highly vulnerable to negative outcomes associated with their opioid use such as overdose. The eligibility criteria for participation in this project are:

1. Adults, ages 18 and up and
2. Baltimore City residents.
3. Meets diagnostic criteria for a moderate (4-5 symptoms) or severe (6 or more symptoms) opioid use disorder OR
4. Individuals presenting with a clear history of opioid addiction but are not currently physiologically dependent (e.g., people recently released from a correctional facility, inpatient hospital, or treatment center), but may be at high risk for relapse and overdose. In these cases, the prescribing physician must clearly document the potential benefits to the person’s health and well-being that outweigh the potential disadvantages of buprenorphine treatment.

Individuals must meet criteria 1 and 2 and either 3 or 4.

E. STAFFING REQUIREMENTS

The OTP Hub staffing must include at least the following and provide the services listed under each:

1. Prescriber: must meet State and Federal OTP Regulations
   a. Medication Management
   b. Ongoing physician consultation and support with streamlined communication pathways with Learning Collaborative

2. Nurse:
   a. Symptom management; Medication/Prescription monitoring and dispensing
   b. Health education and promotion, health home medical coordination, work with case management with referral to Spoke providers

3. Counselor:
   a. Therapy (individual and group) based on Stages of Change
   b. Must be trained to provide therapeutic services for consumers with dual-diagnosis or being able to make the appropriate referral in a timeless and seamless manner

4. Peer Specialist (1 FTE)
   a. Engagement, support, assistance with resource linkage, Continuing Care Model once consumer has transitioned to a Spoke provider

5. Case Manager (1 FTE)
   a. Resource linkage, coordinating referral to Spoke providers

6. Project Director
   a. Hiring and supervising Hub staff
   b. Oversees data collection
   c. Developing Spoke relationships with community providers

7. Administrative Support
   a. Data Entry
   b. Other administrative support needed for Hub operations.
F. FUNDING AVAILABILITY

The total award is up to $150,000 the approximately six-month grant period. Grant funding made available through this RFP will support the components of this project that expand upon standard OTP services, and the selected OTP provider must access third party reimbursement to support those services. It is the intent of BHSB to ensure funding for this project for the next fiscal year.

The grant funding can cover the following:

- Salary and Fringe
  - Project Director
  - Peer Specialist
  - Case Manager
  - Administrative Support
  - Nursing
  - Other staffing proposed by applicants
- Programmatic Costs associated with consumer engagement and retention. Some examples include transportation, meal assistance during induction, and contingency management.
- Operational and Personnel Costs associated with:
  - Expanding hours of operations to include weekend and/or evening hours (e.g., staff time, increased rent, security costs, etc.)
  - Technology expansion that will be incorporated in delivery of services
  - Establishing and maintaining the Learning Collaborative

G. PROGRAM REPORTING (DELIVERABLES) AND OUTCOMES

BHSB is dedicated to enhancing outcomes reporting system-wide in order to evaluate the quality of public behavioral health services in Baltimore City. Overall, individuals receiving behavioral health services are expected to improve over time, and programs should be able to demonstrate expected outcomes.

The desired outcomes for this project are the following:

- Address known system gaps by increasing access to treatment options, specifically buprenorphine treatment, for people with Opioid Use Disorders with the intention of decreasing overdose (fatal and non-fatal) incidents in Southwest Baltimore.
- Improved health outcomes associated with opioid use disorders such as linkage to primary care and specialty medical providers.
- Decreased use of emergency departments and inpatient settings.
- Improvement of other psycho-social indicators such as stable housing, adequate income, and healthy recovery support systems.
The selected applicant will be expected to submit regular program and financial reports to BHSB using an online Contract Management System during the entirety of the approved contract term. BHSB requires monthly program reporting on key indicators, as outlined below:

- Consumer retention rates
- Overall participation time in the pilot
- Average time for induction
- Average time for transition to Spoke provider
- Health integration services; health promotion and education services provided
- Case management: types of services consumers linked to
- Spoke retention rates
- Numbers of referrals to higher levels of care
- Discharges from the program

**H. PROGRAM MONITORING AND EVALUATION**

BHSB will engage in monitoring activities to evaluate the quality of various aspects of services delivery. Some of these activities could include: a) Site visits to observe, evaluate, and document various administrative and programmatic requirements, b) Review of data reports to evaluate programmatic outcomes, c) Review of financial reports to evaluate financial outcomes, and d) Review of general administrative compliance documents. The selected applicant will be required to participate in all relevant monitoring and evaluation activities.

If, during monitoring activities, it is discovered that the selected applicant(s) is not fulfilling the obligations stated in the contract resulting from this RFP, a Corrective Action Plan may be required, with additional follow-up monitoring to ensure requirements are being met.
II. Overview of RFP

A. PURPOSE OF RFP

The purpose of this RFP is to select a qualified Opioid Treatment Program (OTP) to serve as the hub for this Hub and Spoke project, which is a continuation of BHSB’s Baltimore Buprenorphine Initiative (BBI).

B. APPLICANT ELIGIBILITY

Applicants must meet all of the criteria outlined below to be considered eligible to be selected through this RFP process:

- Certification as an Opioid Treatment Program operating in Baltimore City
- Accreditation as an OTP by an approved Accrediting Organization in the State of Maryland
- Registration as a Health Home site or the ability and willingness to become a Health Home by the end of 2019
- Preference will be given to organizations operating in Southwest Baltimore (zip codes 21216, 21217, 21223, 21229, 21230) or organizations serving significant rates of consumers (at least 75% of enrollees) living in those zip codes

Per BHSB’s Procurement Policy, Minority Business Enterprises (MBEs) or Disadvantaged Business Enterprises (DBEs) will be given preference.

C. PROPOSAL TIMEFRAME AND SPECIFICATIONS

1. Timeline

<table>
<thead>
<tr>
<th>Event</th>
<th>Date/Time</th>
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<tbody>
<tr>
<td>Release Date</td>
<td>October 31, 2018</td>
</tr>
<tr>
<td>Pre-Proposal Conference</td>
<td>November 15, 2018</td>
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<td>December 27, 2018</td>
</tr>
<tr>
<td>Anticipated Contract Start</td>
<td>January 7, 2019</td>
</tr>
</tbody>
</table>

2. Pre-Proposal Conference

**Date:** 11/15/18

**Time:** 12:00 pm

**Location:** Behavioral Health System Baltimore
100 S. Charles St., Tower II, 8th Floor
Baltimore, MD 21201
Attendance by applicants is **strongly recommended**. Applicants who will not be attending the pre-proposal conference may submit questions by email to Keisha Tatum by the close of business on **November 14, 2018**.

Questions posed prior to or during the pre-proposal conference and BHSB’s responses will be posted on BHSB’s website at [www.bhsbaltimore.org](http://www.bhsbaltimore.org) by **November 21, 2018**. Additionally, the questions and answers will be emailed to all individuals who either attended the pre-proposal conference or submitted questions. Questions received after the conference will not be considered or responded to.

### 3. Proposal Due Date, Time, and Location

Proposals must be submitted electronically by email to [Keisha.Tatum@BHSBaltimore.org](mailto:Keisha.Tatum@BHSBaltimore.org) by attaching one or more PDF files. Because some email systems prohibit sending or receiving large files, applicants may need to split files into multiple emails. It is recommended that a separate email be sent with no attachments to request confirmation that the proposal was received.

All proposals must be received no later than **4:00 pm EST on December 3, 2018**. All submitted proposals become the property of BHSB. Proposals submitted after the closing date will not be considered.

### 4. Authorized Contact

Applicants are advised that the authorized contact person for all matters concerning this RFP is Keisha Tatum, whose contact information is listed below.

Keisha Tatum, Director of Contract Operations  
Behavioral Health System Baltimore  
100 South Charles Street, Tower II, 8th Floor  
Baltimore, MD 21201  
Email: [Keisha.Tatum@BHSBaltimore.org](mailto:Keisha.Tatum@BHSBaltimore.org)  
Phone: 410-637-1900 Ext. 8530


### D. AWARD OF CONTRACT

The submission of a proposal does not, in any way, guarantee an award. BHSB is not responsible for any costs incurred related to the preparation of a proposal in response to this RFP. BHSB reserves the right to withdraw an award prior to execution of a contract with a selected applicant in BHSB’s sole and absolute discretion.
BHSB will select the most qualified and responsive applicants through this RFP process. BHSB will enter into a contract with selected applicants following the notification of award. All selected applicants must comply with all terms and conditions applicable to contracts executed by BHSB.

E. RFP POSTPONEMENT/CANCELLATION

BHSB reserves the right to postpone or cancel this RFP, in whole or in part.

F. APPLICANT APPEAL RIGHTS

Applicants may file an appeal to the Director of Contract Operations within five days of notification of non-award. The Director of Contract Operations will review the appeal, examine any additional information provided by the protesting party, and respond to the protestor within ten working days of receipt of the appeal.
III. Format and Content of Proposal

A. PROPOSAL INSTRUCTIONS

Applicants should submit all required information in the format specified in these instructions by the due date. The proposal narrative should be submitted using the outline provided in the next section, and should not exceed 10 typed, single-spaced pages using Times New Roman 12-point font. The cover letter and appendices do not count toward the page limit.

The final proposal package shall include:

- A proposal cover letter signed and dated by an authorized representative of the applicant organization. The cover letter must include the full legal name of the applicant organization, address, and the designated contact person and their contact information.
- A full proposal with all appendices.

Late proposals will not be considered.

B. PROPOSAL NARRATIVE OUTLINE AND RATING CRITERIA

The proposal should be a clear, concise narrative that describes the applicant’s responses to the prompts outlined below. This narrative outline will also be used as the rating criteria, and the number of points allocated to each section is also noted.

1. Organizational Background and Capacity (25 points)
   a. Provide an overview of your organization, including its history and experience as an OTP, when it became licensed and accredited as an OTP. Attach as appendices its OTP license, accreditation certificate, and most recent OHCQ Site Visit Report, including statement of deficiencies.
   b. Provide the location of the OTP and whether it falls within the zip codes listed in the eligibility criteria. If it is not physically located in Southwest Baltimore, include information about the numbers of people served who live in the zip codes identified compared to the total number of people served by the program. Note: Programs not located in Southwest Baltimore must have a minimum of 75% of their consumer census residing in those zip codes in order to be given preference.
   c. Describe whether your organization is registered as a Health Home in Maryland, and if not, whether your organization is willing and able to become a Health Home by the end of calendar year 2019. Attach your organization’s Health Home designation, if applicable. Either way,
describe how your organization would use Health Home services to support this project.

d. Attach your organization’s certification as a Minority Business Enterprise (MBE) or Disadvantaged Business Enterprise (DBE), if applicable.

2. Values and Principles (10 points)
   a. Describe how your organization’s current practices ensure services are delivered in a culturally and linguistically competent manner, responsive to the diverse communities served, including individuals for whom English is a second language.
   
   b. Describe your organization’s commitment to providing services that are: recovery oriented, trauma informed, and person centered that ensures and promotes equity in a way that alleviates stigma of those receiving medication assisted treatment.

3. Service Delivery (25 points)
   a. Describe your organization’s plan to provide all services as outlined in the Scope of Service section of this RFP, including how your organization plans to: (i) provide treatment on demand and (ii) develop relationships and coordinate care with Spoke providers as identified in the Hub and Spoke model.
   
   b. An important aspect of this project is to shift the culture in the delivery of medication-assisted treatment in OTP settings, such as consumers coming to the OTP every day to receive medication. Please identify two action steps your organization is willing to make this type of shift to be successful with this project.
   
   c. Individuals in early stages of change are often ambivalent about engaging in treatment for opioid use disorders. Identify at least two engagement/retention strategies.
   
   d. Describe how your organization proposes establishing and growing the Learning Collaborative with Spoke providers, including how your organization will provide technical assistance and guidance to the Spoke providers.
   
   e. Describe the types of technological innovation your organization would propose to improve the delivery of buprenorphine services? Describe what innovative practices in the area of technology your organization already uses and how it approaches staying abreast of emerging best practices that better meet people’s needs.

4. Staffing Plan (15 points)
   a. Describe your proposed staffing plan, including positions that will be funded through grants and fee-for-service revenue. Attach an organizational chart as an appendix.
b. Peer Specialists play a critical role in engaging individuals with opioid use disorders in treatment. Describe in detail how your organization will integrate peer support into your current services and proposes using and supporting the Peer Specialist within this project.

c. Describe proposed case-loads for all staff positions within this project and how those numbers were established.

5. Program Evaluation and Quality Assurance (10 points)
   a. Describe any complaints/ recommendations your organization has received within the past three years regarding quality assurance practices and how your organization addressed them. Please include consumer complaints. If your organization has not received any complaints, describe its policy for handling consumer complaints.

   b. Is your organization considered a “Good Neighbor” within the community in which it is located? This includes active participation with the neighborhood association and/or having community relations staff that are actively engaged in the overall welfare of the community and its residents.

6. Proposed Program Budget (10 points)
   a. Attach as an appendix a line item budget that includes anticipated revenue from both grant funding and fee-for-service reimbursement and all expenses.

   b. Provide a budget narrative that explains revenue and expense projections and justifies expenses.

7. Implementation Timeline (5 points)
   a. Provide an implementation timeline that includes recruiting, hiring, and training staff; reaching out to Spoke providers; recruiting consumers; and other relevant activities related to implementing this project.

8. Appendices (0 points, items scored in above sections)
   a. Opioid Treatment Program (OTP) License
   b. OTP Accreditation Certificate
   c. Most recent OHCQ Site Visit Report, Statement of Deficiencies included
   d. Most recent Accreditation Site Visit Report
   e. Most recent financial audit and management letter
   f. Most recent IRS form 990 – Return of Organization Exempt from Income Taxes, if applicable
   g. MBE or DBE Certificate, if applicable
   h. Health Home Designation
   i. Organizational Chart
   j. Proposed Budget