



REQUEST FOR PROPOSALS (RFP): *Peer Respite Study*

Pre-Proposal Conference Held: September 12, 2022 | 11 a.m.
Behavioral Health System Baltimore, Inc.
100 South Charles Street, Tower II, Floor 8
Baltimore, Maryland 21201

BHSB Facilitators:

Kelsi Loos, Procurement Lead
Daniel Rabbitt, Project Lead

QUESTIONS AND ANSWERS

Posted: September 16, 2022

Can you please provide more clarity about the staffing requirement to have at least one FTE project manager? Will this person be able to work on other projects?

We would like one person who is solely devoted to this project. In other words, the FTE project manager should be wholly dedicated to the peer respite study.

Regarding eligibility, can a sub-contractor's experience in research and drafting systems-level be counted towards the requirement to have experience in at least two such projects?

Yes, it is acceptable to account for experience through sub-contraction

How readily available is data, and what type of data is available?

There are multiple sources of available data that the vendor can use to complete the peer respite needs assessment. These data sources include but are not limited to census data, crisis call volume data, mobile response team dispatch data, hospital emergency room data, 911 diversion data, and peer services delivery data.

Is this RFP looking for a Peer Respite plan that is a how-to model or more of a financial model?

We are seeking a business model that describes how to start and maintain a peer respite model.



Are the other LBHAs in the region aware and ready to respond to requests for data?

Yes, we meet with them regularly on GBRICS issues. Similarly, BHSB coordinates with 17 regional hospitals.

Is this project funded through a block grant?

It's an appropriation from the state of Maryland, an earmark.

Have there been internal conversations about the use of state funds and the role of Medicaid as a source of sustained funding for respite operations?

Our hope is that this report might catalyze these discussions. The state is interested in system change, but specific conversations about respite programs are not common.

Is the vision for this Peer Respite project that become part of crisis response, connected to 988 and so on?

The mission of the GBRICs partnership is to strengthen crisis response in the region and reduce reliance on emergency room use and reliance on police response. We would want the vendor to look at peer respite through that lens.

How will the funding be dispersed?

This contract type is a Consultant. Consultants submit their invoices monthly and they are reimbursed monthly, usually within 30 days of receiving the invoice/fiscal report.

What is the composition of the review team?

It will be an independent group of stakeholders, not BHSB staff. GBRICS will not oversee the review or participate in it as an organization. It will consist of around five to seven participants.

End of Questions and Answers