



# **REQUEST FOR PROPOSALS:**

## ***Pregnant Women and Women with Children Residential Treatment Program***

**Release Date: November 30, 2022**

**Pre-Proposal Conference: December 13, 2022**

**Proposal Due: January 3, 2023**

**Anticipated Award Notification: Mid February 2023**

**Anticipated Contract Start: March 2023**

### **Issued by:**

Behavioral Health System Baltimore, Inc.  
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Baltimore, Maryland 21201

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# **REQUEST FOR PROPOSALS**

## ***Pregnant Women and Women with Children Residential Treatment Program***

### **I. Overview of the Project**

#### **A. OVERVIEW OF BHSB**

Behavioral Health System Baltimore, Inc. (BHSB) is a non-profit organization tasked 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 organization to implement integrated models of residential care for pregnant and parenting women with a substance use disorder while enabling them to live with their young children during their residential treatment.

This approach addresses the well-being of pregnant mothers and mothers with children and supports them in caring for themselves and their families to gain independence. Findings in recent studies support policies and programs that invest in long-term and permanent housing for women with children that include intensive case management and allow for women to be housed with their children.

There is general agreement that substance use treatment for women who are pregnant, and or parenting requires a specialized, individualized approach. This includes child welfare navigation, education and job training, mental health, financial benefits, and housing.

### **C. SCOPE OF SERVICE**

Providers will deliver coordinated services that combine obstetrical care, substance use treatment (including medication-assisted treatment), mental health treatment, housing services, peer navigation, and service coordination. Other coordinated services should include child welfare navigation, education and job training, and financial literacy. Consideration of meditation and mindfulness for mental health needs is encouraged. It is preferable to offer treatment and childcare in the same facility and/or offer on-site drop-in access.

The provider will serve 20 consumers annually through a program located in Baltimore City. The provider must take referrals from across the state, giving preference to Baltimore City residents. A childcare specialist must also supervise participating children 24 hours a day while providing supportive services to them during the mother's stay.

Service delivery should begin as soon as possible and no later than sixty days after the grant award. There must be 80% utilization of the beds weekly for pregnant women and women with children and 80% of the children in the program will receive age-appropriate prevention services. Weekly census reports will be submitted by the provider to BHA and BHSB to monitor progress. Additional required reporting is outlined in the PWWC Residential ASAM Level 3.3 Manual.

The provider must retain 90% of participants in treatment based on their medical necessity and treatment progression and ensure that 90% of consumers discharged will be referred to a lower level of care based on medical necessity. The applicant must adhere to all requirements in the [PWWC Residential Medium Intensity 3.3 Program Manual](#), including reporting requirements.

All program referrals will be generated by the Behavioral Health Administration's (BHA's) Gender Specific Unit based on consumers' medical necessity and the need for ASAM 3.3 level of care, Residential SUD Treatment services.

Providing childcare has several benefits to mothers including better attendance in substance use and mental health treatment and recovery activities; engagement in school and job preparation; allowing for a break from the stress of parenting while attending to recovery; establishment of a routine for the family; and developmental stimulation for the child. A program steeped in developmentally appropriate practices and therapeutic approaches that emphasize Infant and Early Childhood

Mental Health principles would be most appropriate. Active collaborations with local Early Head Start and Head Start programs and the Baltimore City Public school system will be considered. Childcare services should also be offered for school-aged children during non-school hours to accommodate maternal appointments for treatment, education, and employment acquisition.

Reducing Stigma and offering nonjudgmental, relationship-based services are vital to successful programming. Models should emphasize nonjudgmental language and practices, be relationship-focused, build trust, and respect mothers as part of the program. This approach increases retention and compliance. The inclusion of harm reduction and medication-assisted treatment approaches and practices is preferred because recent evidence indicates that an insistence on abstinence as the only metric of success is not appropriate.

Programs should be focused on building an attachment relationship, encourage reflective abilities in parents to see the child's point of view, emphasize reduced negative behaviors while increasing positive interactions, have a manualized approach, and meet routinely for a set period of time.

In recognition of the challenges of having all programs and services on site within a single agency, collaborations and contracts with local agencies are allowed. This can include subawards, formal Memoranda of Understanding, and documented referral, linkage, and engagement processes. Demonstration of effective partnership and evidence of commitment to collaboration is required.

#### **D. FOCUS POPULATION**

The focus population for this program is women with children and pregnant women in need of ASAM 3.3 level of care substance use disorder treatment and housing stability.

#### **E. STAFFING REQUIREMENTS**

A portion of the funds will be used to employ two childcare staff positions (1 FTE each) at a total of \$74,793 including salary and fringe.

The remaining positions should be congruent with 3.3 Level of Care services and should work with Pregnant Women and Women with Children as outlined in COMAR 10.63. Maryland Department of Health 10.09.06 Adult Residential Substance Use Disorder Services. The program's current Peer Recovery Support Specialists will provide non-clinical assistance and recovery support while following up with the women and their young children.

## **F. FUNDING AVAILABILITY**

The total award amount available is \$306,864.

This includes a one-time award for start-up costs in the amount of \$200,000. Allowable costs for the start-up funds include household items for consumers such as bedroom and kitchen items, etc., the delivery of childcare/educational services including toys, educational materials, tables, desk, chairs, games, recreational items, bedroom items etc., and funding for related services for PWWC ASAM 3.3 Residential Treatment Program (i.e., transportation, medical supplies etc.)

Ineligible uses of the start-up funds include treatment services that are reimbursable by Medicaid and the purchase of medication including buprenorphine, naloxone, methadone, long-acting naltrexone (Vivatro). Funds may not be used if other funding sources are available to pay for services including reimbursement for uninsured consumers. If a consumer is uninsured, the provider will follow the Uninsured Eligibility process to obtain services within the Public Behavioral Health System. These start-up funds may not be used for any items or services that are not directly related to the start-up cost for PWWC ASAM 3.3 Residential Treatment Program. Funding may not be used for capital projects in accordance with the guidelines set forth by the Behavioral Health Administration.

The remaining \$106,864 for childcare during treatment will be funded annually for four years. This will include the salaries for childcare staff.

## **G. CONTRACTING WITH BHSB**

Applicants selected through this process will enter into a contractual agreement with BHSB. Following a notification of selection, BHSB will issue a Letter of Award that provides details about the contract and the process for executing it. Selected organizations will be required to submit a new budget on BHSB's budget form, which will be reviewed for allowable costs under the grant.

Please note that applicants may be asked to change their budgets and/or details of their proposals even if the proposal were selected for funding. Applicants new to BHSB's contract process are encouraged to review relevant forms available on our website here: <https://www.bhsbaltimore.org/for-providers/forms-for-providers>.

### Contract Type and Payment

The contract and payment type that will result from this procurement is described below. Applicants are encouraged to consider whether their organization will be able to operate with this payment mechanism before applying for these funds.

- Cost Reimbursement – Actual Expenditures

- Vendor receives payment after costs are incurred and reported. Payment is based on the costs reported for a specific period.

BHSB issues payments once per month. Applicants should note that submitting required documents and reports late can result in delayed payment.

#### Contract Monitoring and Technical Assistance

Selected applicants will be required to submit regular Program and Financial reports to BHSB using an electronic contract management system. BHSB will review these reports to monitor progress and contract compliance throughout the contract term.

**Program Reports** include an update on progress toward deliverables (e.g., number of people served, number of services delivered, etc.). Some program reports may also require organizations to attach a data report with additional information (e.g., consumer demographic information, process and/or outcomes data, etc.). BHSB monitors progress on these reports throughout the contract term and may offer technical assistance and support if deliverables are not being met.

**Financial Reports** are required to generate payment and involve submitting actual expenditures or invoices (depending on the contract type) and to monitor spending compared to the budget or award amount. If organizations are spending more or less than expected awarded throughout the contract term, BHSB may offer technical assistance and support to ensure the funding covers the contract term fully and may reduce funding if all funds are not likely to be expended by the end of the contract term.

Please note that submitting Program or Financial Reports late can result in delayed payment.

#### Verification of Services

BHSB audits all contracts to review whether the requirements set forth in the contract were completed as reported and that relevant federal, state, and local regulations were followed. This generally occurs after the conclusion of the contract period. Audits may be conducted remotely through a review of documents submitted to BHSB or on-site at the organization's location.

Applicants should be aware of best practices in documenting both programmatic and financial activities to aid in an efficient audit.

## II. Overview of RFP

### A. PURPOSE OF RFP

The purpose of this RFP is to select a provider to implement a residential ASAM 3.3 level of care program for women with children and pregnant women with a substance use disorder while housing them with their children and providing childcare for those children.

This aims to provide the best possible outcome for both mother and child through an individualized and specialized approach that employs a nonjudgmental, relationship-based strategy.

### B. APPLICANT ELIGIBILITY

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

- Licensed 3.3 ASAM level of care provider that can provide residential SUD treatment services.
- Meet COMAR staffing patterns and meet all standard BHA 10.63 Licensing regulations during the life of the contract.
- A minimum of 1 year experience providing SUD treatment services for PWWC population is preferred.

### C. PROPOSAL TIMEFRAME AND SPECIFICATIONS

#### 1. Timeline

Release Date:	November 30, 2022
Pre-Proposal Conference:	December 13, 2022
Proposal Due:	January 3, 2023
Anticipated Award Notification:	Mid February, 2023
Anticipated Contract Start:	March 2023

#### 2. Pre-Proposal Conference

**Date:** December 13, 2022

**Time:** 11:00 am

**Location:** Microsoft Teams meeting - Join on your computer or mobile app

[Click here to join the meeting](#)

**Or call in (audio only):** +1 443-819-0973,761159488#

Phone Conference ID: 761 159 488#



*Please join five minutes early to leave time to troubleshoot. If you have any problems accessing the meeting, please contact [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org).*

All questions related to this RFP should be submitted in advance to [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org) no later than the close of business on **December 12, 2022**. There may be time at the end of the meeting to ask additional questions, depending on the number of questions submitted.

Questions posed prior to or during the Pre-Proposal Conference and BHSB's responses will be posted on BHSB's website at <https://www.bhsbaltimore.org/for-providers/funding-opportunities/> by **December 20, 2022**.

The questions and answers will also be emailed to all individuals who submitted questions. If you would like to be emailed this document but do not have a question, please let the Procurement Lead know by emailing [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org).

*Questions received after this conference cannot be answered.*

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

BHSB uses Survey Monkey Apply (SM Apply) to manage applications. All proposals must be submitted through this system. Applicants must register with the system ahead of time and submit narrative and supporting documents directly through the system. You are able to save your application and continuing working on it before submitting it. BHSB encourages all applicants to test this system well in advance of submitting proposals.

Applicants can access SM Apply here: <https://bhsb.smapply.org/>

All proposals must be received no later than **12:00 pm (noon) EST on January 3, 2023**. All submitted proposals become the property of BHSB. If you are having technical troubles related to submitting your proposal, contact BHSB before the due date/time at [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

*1. Proposals submitted after the due date/time cannot be considered.*

### **5. Authorized Contact**

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

Kelsi Loos, Procurement Lead  
Email: [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

**6. Anticipated Service Term:** Start up period (\$200,000) is from the start of the contract to 3/14/23. Childcare during treatment funding (\$106,864) is from the start of the contract to 6/30/23 with options to renew annually for four years pending availability of funding and performance.

#### **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.

Prior to selection, BHSB will conduct a risk assessment that includes a review of financial and compliance/quality documentation.

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 within five days of notification of non-selection. BHSB 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.

#### **G. GOVERNING LAW AND VACCINATION MANDATES**

The applicant acknowledges and agrees that BHSB is a federal contractor for purposes of Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors (the "Order"). The applicant and its subcontractors shall comply with the Order and all other applicable mandates, rules, laws, and regulations (collectively, the "Requirements"). Upon request by BHSB, selected applicants shall promptly provide evidence of compliance with the Requirements and shall promptly take such further actions as may be requested by BHSB with respect to the Requirements and/or the resulting Contract. The applicant and all of its subcontractors shall, for the duration of the resulting Contract, comply with all guidance for contractor and subcontractor workplace locations published by the

Safer Federal Workforce Task Force. These requirements shall be incorporated into all subcontracts of Sub-Vendor.

## **Format and Content of Proposal**

### **H. PROPOSAL INSTRUCTIONS**

Applicants must submit all required information using Survey Monkey Apply (SM Apply) accessible here: <https://bhsb.smapply.org/>.

*Late proposals will not be considered.*

It is the policy of BHSB to adhere to the rules and regulations in the Health Insurance Portability and Accountability Act (HIPAA). We do not anticipate that any proposal submitted in response to this RFP would include individually identifiable health information. However, if it does, please remember that protected health information (PHI) needs to be secured via encryption and should adhere to the Guide to IT Privacy and Security of Electronic Health Information:

<https://www.healthit.gov/topic/privacy-security-and-hipaa/health-it-privacy-and-security-resources-providers>.

### **I. PROPOSAL NARRATIVE OUTLINE AND RATING CRITERIA**

The outline below shows the information being requested for applications and how points will be awarded during the review. Use SM Apply to submit your responses. See the instructions for more information about how to submit proposals.

#### **1. Organizational Background and Capacity (15 points)**

- a. Provide an overview of your organization, including how long it has operated residential treatment service or became licensed as residential treatment program and when it received or expects to receive accreditation. Attach as an appendix all relevant licenses and certifications.
- b. Describe the organization's history and experience, including length of time, delivering behavioral health services to women with children, including evidence-based practices used.
- c. Describe your organization's history forming partnerships with organizations supporting the care of women and children. Attach two letters of support that demonstrate this type of partnership in the appendix.
- d. Describe whether your organization is owned and/or led by members of historically marginalized or oppressed groups, including racial and ethnic groups (i.e., African American/Black, Latinx), LGBTQIA communities, people with disabilities including behavioral health

disorders, etc. BHSB awards additional points to help address systemic barriers that have led to inequity in access to funding.

## **2. Principles and Values (20 points)**

- a. Describe your understanding of Social Determinants of Health and what it means for your organization's work. How will your organization address the impact of social determinants of health in this program?
- b. Describe your organization's commitment to and understanding of the principles of a Recovery-Oriented System of Care (ROSC) that supports client self-determination and multiple pathways of recovery.
- c. Describe your organization's commitment to a trauma-informed and responsive approach and any trauma-specific interventions your organization currently offers or would implement if awarded this grant.
- d. 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 (35 points)**

- a. Describe your organization's plan to provide all services as outlined in the Scope of Service section of this RFP.
- b. Describe your organization's ability to successfully implement evidence-based trauma-responsive services, how you will use these interventions within the program, and maintain fidelity to the standards model.
- c. Describe your organizations plan to implement person/family-centered services and treatment planning, to include support of behavioral health needs (mental health/substance use disorder treatment), medical needs and other identified areas of needed support to ensure overall wellbeing.
- d. Describe how your organization will facilitate effective transitions from one level of care to another.
- e. Describe other behavioral health services your organization provides and what structure/process you will use to avoid conflicts of interest and inappropriate self-referral.
- f. Describe how the proposed program would be responsive to the needs of the city as a whole as well as the local neighborhood surrounding the program.
- g. Describe how the proposed program would handle overdoses, suicide risk, and behavioral health crises when they occur onsite, giving examples of how your organization has managed these in the recent past.

**4. Staffing Plan (15 points)**

- a. Describe your proposed staffing pattern, including supervisors, and how it will fulfill the staffing requirements in this RFP. Include an organizational chart that shows how this program will fit into your organization's overall structure.
- b. Describe your proposed training plan for staff assigned to this program and indicate any relevant expertise, training, and/or skills staff already possess.
- c. Describe how the program would support consumers to become certified peers and foster their professional development, providing examples of how your organization has done this in the recent past.

**5. Effectively Serving the Focus Population (10 points)**

- a. Describe how your organization is uniquely qualified and designed to address known disparities experienced by this population.
- b. Describe how your organization will ensure people from the focus population are hired as staff or have meaningful input into the planning, implementation, and ongoing operations of the project.

**6. Program Evaluation and Quality Assurance (15 points)**

- a. Describe any previous experience your organization has implementing projects similar to this one. Were you able to meet all of the programmatic and financial deliverables and reporting requirements? If there were any quality concerns, how were they addressed?
- b. Describe what data you propose using to inform the planning process, and how you will collect, analyze and present data.
- c. Specify how consumers' Protected Health Information will be collected, stored, and shared in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-1911 and Title 42, Part 2 of the Code of Federal Regulations governing the confidentiality of Substance Use Disorder Patient Records (42 CFR Part 2).

**7. Proposed Program Budget (5 points)**

- a. Attach a line-item budget for the grant period in the RFP that includes anticipated revenue from grant funding and fee-for-service reimbursement and all expenses as an appendix. BHSB has budget forms on its website that can be used but are not required for this submission.
- b. Provide a budget narrative/justification that explains revenue and expense projections in more detail. The budget narrative should be included in the body of your proposal, not as an appendix.

**8. Implementation Timeline (5 points)**

- a. Provide a detailed timeline for implementation that includes all of the activities that you have committed to perform in your proposal. Show an outline of all the steps necessary to fully operationalize this project

and by when each step would be completed. Contracts are expected to start in February of 2023.

## **9. Appendices**

- Copies of all relevant licenses/certifications including any licenses issued by Maryland Department of Health (BHA and OHCQ).
- Organizational chart
- Letters of support
- Line-Item Budget
- Most recent site visit report from the ASO, Accrediting Organization, and/or the Office of Health Care Quality (OHCQ), including any statements of deficiencies and program improvement plans
- Most recent final Financial Audit package including Findings and Management Letter from an independent auditor (preferred) OR a recent unaudited Income Statement AND Balance Sheet, if an audit is not available.
- Most recent IRS 990 – Return of Organization Exempt from Income Taxes or Tax Return
- Certificate of Good Standing from the Maryland Department of Assessments and Taxation (screenshots from the MDAT website will not be accepted)
- Copy of Fire Inspection Certificate
- Use and Occupancy Certificate