



# **REQUEST FOR PROPOSALS:**

***BCDSS Mental Health Services***

***for***

***Children in Out-of-Home Care***

**Release Date: July 25, 2025**

**Pre-Proposal Conference: July 30, 2025 @ 1:00 p.m.**

**Reschedule-Friday, August 1, 2025 @ 11 a.m.**

**Proposals Due: August 25, 2025, at 5:00 p.m.**

**Anticipated Award Notification: September 26, 2025**

**Anticipated Contract Start: November 1, 2025**

**Issued by:**

Behavioral Health System Baltimore, Inc.  
100 South Charles Street, Tower II, 8<sup>th</sup> Floor  
Baltimore, Maryland 21201

## Table of Contents

I.	Overview of the Project.....	3
A.	Overview of BHSB.....	3
B.	Overview of Project.....	3
C.	Scope of Service (including deliverables) .....	4
D.	Focus Population.....	8
F.	Funding Availability .....	9
G.	Quality and Financial Review .....	9
H.	Contracting with BHSB .....	9
II.	Overview of RFP .....	12
A.	Purpose of RFP .....	12
B.	Proposal Timeline and Specifications.....	13
C.	Award of Contract.....	14
D.	RFP Postponement/Cancellation .....	15
E.	Applicant Appeal Process.....	15
III.	Format and Content of Proposal .....	16
A.	Proposal Instructions.....	16
B.	Proposal Narrative Outline and Rating Criteria.....	16

# REQUEST FOR PROPOSALS

## ***BCDSS Mental Health Services for Children in Out-of-Home Care***

### **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 one (1) qualified Outpatient Mental Health Center (OMHC) to provide mental health services to children living in out-of-home care in the Baltimore City Department of Social Services (BCDSS). This project aims to serve 480 children per year throughout 4 OMHC, with each serving 120 annually. The target population for this project includes BCDSS-involved Children in Out-of-Home Care ages 5 - 21, with moderate to high-level health needs.

A continuum of mental health services includes prevention, early identification, crisis response, and psychiatric services. Aside from promoting placement stability and reunification, this service improves hospitalization length, fosters permanency,

fosters supportive relationships between youth and caregivers, and expands behavioral health services.

Mental health services provided by selected applicants aim to improve placement stability and reunification, divert, and minimize the impact on children and youth. Shorten hospital stays, increase permanence, foster supportive relationships between youth and caregivers, and expand behavioral health services within the current behavioral health program structure. The Baltimore City Department of Social Services and the sub vendor(s) must also actively communicate and coordinate to ensure the program's success.

*The Modified Consent Decree was entered on October 9, 2009, in the matter of L.J., et al v. Massinga, et al. (the "Decree"). DHS and BCDSS are collaborating on a comprehensive approach to caring for children in foster care under the Decree. The Decree identifies 5 Outcome Areas and includes 86 Internal Success Measures and 40 Exit Standards, which are the specific performance measures and associated targets that BCDSS must meet. BCDSS is required to report to the court on the performance of these measures at regular intervals. This work shall align with ongoing efforts to operationalize a system that meets the mental health needs of children and youth in foster care as required by the Modified Consent Decree (MCD).*

BCDSS and BHSB, through a collaborative partnership, have developed a shared vision wherein children, youth, and their families involved with the Baltimore City Department of Social Services are provided with equitable and comprehensive mental health services that meet the standards described in the Decree. The proposed work shall enhance the structure and capacity of the current system and implement an innovative approach to addressing this vulnerable population's complex and unique needs.

### **C. Scope of Service (including deliverables)**

The BCDSS Mental Health Services for Children in Out-of-Home Care project's objective is to serve a total of 480 BCDSS-involved Children in Out-of-Home Care ages 5 – 21 annually, with each OMHC serving 120. The selected OMHC will provide the services described to children, youth, and families involved with the Baltimore City Department of Social Services (BCDSS) through providing and adhering to compliance with service details, deliverables, goals, and requirements.

#### **Services**

The selected OMHC must:

1. Deliver mental health services in homes, communities, and offices using Evidence-Based Practices (EBPs). In partnership with the Baltimore City

Department of Social Services (BCDSS), they will address the needs of youth in crisis and their families while promoting social skills and strong family ties through a comprehensive prevention and treatment model. Services must be flexible to accommodate each child and family's needs across time and locations. Services include in-person assessments, ITPs, and therapy (if clinically appropriate); document access barriers and coordinate with BCDSS.

2. Offer services based on the child or family's specific location needs, including current or future placement settings such as the primary home or community-based sites. Services must remain flexible in time and location, regardless of whether the youth is placed in Baltimore City or elsewhere in Maryland. Services must be provided on dates/times agreed upon by the youth, their families, and BCDSS staff—or as required by the prescribed Evidence-Based Practice dosage. Scheduling should remain flexible and responsive to client needs.
3. Offer Evidence-based intervention. This can include traditional counseling and alternative therapeutic methods—such as art, movement, mindfulness, or pet therapy—may be integrated or recommended based on clinical assessment and client need.
4. Be certified in the Baltimore City Foster Care Clinician Curriculum, which is rooted in youth/family input and implementation science. The curriculum trains clinicians to support children and families in the child welfare system with a culturally responsive approach. Delivered via 18 asynchronous 2-hour sessions over 10 weeks, totaling 36 training hours.
5. Engage in teaming activities—such as FTDMs, Facilitated Meetings, and treatment team meetings—to support collaborative planning and decision-making with children, youth, and their families.

The selected OMHC will:

1. Employ four licensed providers, each managing a caseload for up to 30 clients.
2. Be "ready for services," OMHCs must assign a licensed provider, schedule the initial meeting, and deliver services at a location convenient for the family, per BCDSS direction. OMHCs will collaborate with BCDSS to overcome service barriers and must report completions, reasons for delays, and the "ready" date in the BHSB monthly report.
3. Within 48 hours of the first meeting, OMHCs must complete the Intake assessment and treatment recommendations and submit them to the BCDSS Youth Wellness Program Manager and caseworker. Completion rates and

reasons for any incomplete assessments must be included in the BHSB monthly report.

4. Within 72 hours of a referral being “ready for services,” the assigned licensed provider must begin services by meeting with the client at their placement or preferred location. Completion data and reasons for any missed starts must be included in the BHSB monthly report. If applicable, will notify BCDSS Mental Health Supervisor within 1 hour if scheduled services are not provided.
5. Will collaborate with the BCDSS-designated staff to receive service requests. Requests include the youth’s name, DOB/age, and location/time of service. The request must also include: contact info for the BCDSS caseworker and current caretaker, a summary of service needs, the service goal, and the youth’s Medical Assistance Number.
6. Offer 24/7 crisis care via phone, text, or chat, ensuring swift, least-invasive support to protect child safety. In-person, on-site intervention may be provided when needed, involving caregivers and child welfare staff. A crisis care plan must be shared with the BCDSS Youth Wellness Program Manager and caseworker within 24 hours of response.
7. Report all incidents involving staff or clients by the end of the business day, with a written report submitted the following business day to the BCDSS Program Manager. Report injuries, suspected abuse/neglect, or self-harm incidents immediately to a BCDSS Program Manager and CPS hotline.
8. Secure psychiatry services for evaluations and medication management, billing Medicaid accordingly. For each initial and ongoing (every 90 days) appointment, a written psychiatric evaluation—per COMAR 10.21.20.08—must be submitted to the BCDSS Youth Wellness Program Manager and caseworker. Caseworkers must document medication details, including dosage, purpose, and side effects, and submit this within five business days of each appointment. The selected OMHC will maintain a record of all psychiatric services, including referrals, evaluations (submitted within 5 business days), and medication tracking (every 90 days).
9. Complete a written Individual Treatment Plan (ITP) in line with Maryland COMAR 10.21.20.07 and submit it to the BCDSS Youth Wellness Program Manager and caseworker every six months.
10. Ensure clients are not discharged due to repeated no-shows or no-calls. Discharge planning must involve the child/youth, their family or caregiver, the BCDSS Youth Wellness Program Manager or designee, and the caseworker.

11. Provide a written explanation due within 5 business days if a service request is declined.
12. Collect and report data to submit monthly reports to BCDSS. Report includes:
  - a. Referral & Assessment Data: Referrals accepted/declined, intakes completed, and initial assessments with treatment recommendations.
  - b. Treatment Plan Metrics: Number of ITPs completed by the 5th session and updated every 6 months.
  - c. Referral Sources: Categorized as BCDSS Navigator, Psychiatrist, MATCH, or Other.
  - d. Unassessed Referrals: Includes placement disruptions, inaccessible families, or pending/canceled appointments.
  - e. Service Disruptions: Due to AWOL, hospitalization, withdrawal (by DSS, caregiver, or youth).
  - f. Service Delivery: Unduplicated clients served, session counts (in-person, virtual, phone), canceled appointments, psychiatric referrals, crisis calls, urgent responses (5 PM–8 AM).
  - g. Team Engagement: Meeting participation (e.g., FTDM), multidisciplinary team services, and care continuity consultations.
  - h. Staffing: 24/7 coverage and retention data, new/current staff names and counts.

### **Project Deliverables.**

OMHCs must submit monthly reports and invoices by the 10th of each month. Failure to submit both together and on time may delay payment processing, as BCDSS must meet the Department of Human Services' Invoice Approval Process requirements. Each report will document:

1. Maintain a compliant staffing pattern
2. Select and implement appropriate Evidence-Based Practices (EBPs)
3. Collaborate closely with BCDSS to meet the needs of youth in crisis and their families
4. Ensure all clinicians and supervisors complete the Baltimore City Foster Care Clinician Curriculum and associated coaching; supervisors must attend at least the required one-day session
5. Develop and maintain a training and supervision plan; lower licensed staff must be supervised by LCSW-Cs or LCPCs

6. Provide timely clinical response: assign a provider within 24 hours, complete intake within 48 hours, and initiate services within 72 hours of referral readiness
7. Complete ITPs per COMAR 10.21.20.07 and update every six months
8. Ensure access to psychiatric services with evaluations and documentation every 90 days per COMAR 10.21.20.08
9. Conduct in-person assessments and services when clinically appropriate, documenting any barriers
10. Participate in collaborative meetings (e.g., FTDMs, treatment teams) to support shared decision-making
11. Provide responsive, 24/7 crisis care (phone, text, chat), including on-site intervention as needed
12. Attend all BHSB and BCDSS meetings related to mental health services for youth in care
13. Apply trauma-informed practices that address recognition, prevention of re-traumatization, and healing
14. Comply with all service goals and deliverables outlined in the service description
15. The service radius is extended to Baltimore City and all surrounding counties in Maryland.

#### **D. Focus Population**

This program is designed for children and youth aged 5-21 or until clinically appropriate for discharge or transition. Families who are involved with BCDSS in some capacity and are facing moderate to high-risk, complex mental health problems will also have access to this project.

#### **E. Staffing Requirements**

1. OMHC must employ four (4) 1.0 FTE Licensed Mental Health Providers.
2. Master's Level Licensed Mental Health Professionals licensed to practice in Maryland. This includes:
  - a. Licensed Certified Social Workers (LCSW-Cs) or Licensed Clinical Professional Counselors (LCPCs) licensed in Maryland to practice independently.



- b. Licensed Master's Social Workers (LMSW), and Licensed Graduate Professional Counselors (LGPC). Must receive supervision from OMHC-employed, preferably on-site, as required by their specific professional board
- 3. All licensed mental health professionals will have relevant experience and knowledge of the population of focus to be served. Professionals should have knowledge of treatment strategies in the areas of youth behavior management and family crisis intervention, the ability to effectively work with families in a supportive manner throughout the diagnostic and referral processes, and the ability to provide mental health treatment for children, youth, and their families.
- 4. All staff providing services with this project must complete annual CPS background checks and initial clearances, including:
  - a. Maryland & Federal Criminal Background (CJIS-CR)
  - b. CPS Clearance Form
  - c. Maryland Judiciary Registry Search
  - d. National Sex Offender Registry
- 5. The selected OMMC will collaborate with BHSB staff to determine the appropriate FTE for managing the data collection requirements for this project.

## **F. Funding Availability**

November 1, 2025, to June 30, 2026- prorate award amount \$316,664

If awarded, FY27 award amount- \$475,000. The selected OMHC must bill all Medicaid reimbursement services through the public behavioral health system and use grant funds only for non-reimbursable services.

## **G. Quality and Financial Review**

As part of BHSB's procurement process, internal quality and financial reviews are completed to ensure there are no significant concerns with the organization(s) being selected. Applicants should be sure to provide the most recent available versions of all requested documentation with their RFP application in order to ensure this is a smooth process.

## **H. 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. The selected applicants will be required to submit a new budget on BHSB's budget forms, 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 was 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 are 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.

#### Fee For Service

- A set rate is charged for performing a defined service under the contract. The total cost of the contract is based on a calculation that includes the service rate and the estimated number of services to be provided and/or the number of consumers to be served.
- Payment is based on the costs reported for a specific period (e.g., fee rate x # of services provided).

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 on track to be 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 throughout the contract term, BHSB may offer technical

assistance and support to ensure the funding covers the contract term fully, and BHSB 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. Failure by vendors to comply with the terms of any contract with BHSB may result in the denial of future contracts with BHSB.

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 qualified OMHCs to provide mental health services to children living in out-of-home care in BCDSS; it is aimed at serving 480 children per year. The target population for this project includes children and youth with moderate to high-level health needs. Outpatient Mental Health Centers (OHMCs) will provide children, youth, and their families with evidence-based mental health services. This project will employ the expertise of licensed clinicians, as well as provide reporting to BCDSS monthly to establish best practices in the community served.

### **Applicant Eligibility**

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

- Licensed as an Outpatient Mental Health clinic in the state of Maryland. Licensure and accreditation as an Outpatient Mental Health Center (OMHC) for at least two years, and can access reimbursement through the Public Behavioral Health System/ Administrative Service Organization (ASO).
- OMHCs must be capable of promptly deliver treatment services to children and youth referred by the Youth Wellness Program, billing Maryland Medical Assistance (MA) per COMAR 10.21.20.05 and 10.21.17.03. Service authorization needs may vary, requiring close collaboration with BCDSS to manage MA eligibility.
- 2 years of direct experience delivering individual, group, and family therapy to children, youth, and families (ages 3–21).
- Proficiency in diverse clinical modalities such as art, play, and culturally responsive therapies.
- Capacity to work with families across cultures, languages, and identities, including LGBTQIA and transition-age youth.
- Strong foundation in trauma-informed care, including complex and intergenerational trauma.
- Familiarity with the systems involved with youth and families, as well as the challenges commonly encountered by this targeted population.

- Expertise in addressing developmental, emotional, and attachment-related concerns
- In Good Standing with the Maryland Department of Assessments and Taxation. [if BHSB will consider applications from organizations based in a state other than Maryland, add: (If the selected applicant's business is registered in a state other than Maryland, they will be required to register in Maryland as part of the contracting process.)

## B. Proposal Timeline and Specifications

### 1. Timeline

Release Date:	July 25, 2025
Pre-Proposal Conference:	July 30, 2025 @ 1 pm- rescheduled date- August 1, 2025 @ 11 am
Proposal Due:	August 25, 2025 @ 5 pm
Anticipated Award Notification:	September 26, 2025
Anticipated Contract Start:	November 1, 2025
Anticipated Service Start:	November 1, 2025

### 2. Pre-Proposal Conference

**Date:** July 30, 2025- rescheduled date-August 1, 2025

**Time:** 1:00 pm- 11 am

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

**Click here to join the meeting** [Join the meeting now](#)

**Or call in (audio only): Dial in by phone**

[+1 443-819-0973,,8796276#](#) United States, Bel Air

Phone conference ID: 879 627 6#

*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).

Questions related to this RFP will be answered at the Pre-Proposal Conference. Questions posed during the conference and BHSB's responses will be posted on BHSB's website by **August 8, 2025**.

Individuals who attended the Pre-Proposal Conference will be notified by email when questions and answers are posted on BHSB's website.

*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 continue 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 **5:00 pm EST [or EDT] on August 25, 2025**. 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).

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

### **4. Interviews (if applicable)**

Applicants whose proposals are ranked highest by a Review Committee may be asked to participate in an interview. Interviews are expected to take place the second and third weeks of \_\_\_\_\_ (month and year).

### **5. Authorized Contact**

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

Ashley Coston, Procurement Lead

Email: [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

6. **Anticipated Service Term:** November 1, 2025- June 30, 2026, with options to renew annually pending availability of funding and performance.

### **C. 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.

#### **D. RFP Postponement/Cancellation**

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

#### **E. Applicant Appeal Process**

Applications must be complete and fully responsive to the below Proposal Narrative Outline and must include all required appendices. Applicants may file an appeal within five days of notification of non-selection. BHSB will not review new proposal materials that were not included in the application. BHSB will review the appeal letter and respond to the non-selected applicant within ten working days of receipt of the appeal.

### III. Format and Content of Proposal

#### A. Proposal Instructions

- Applicants must submit all required information using Survey Monkey Apply (SM Apply) accessible here: <https://bhsb.smapply.org/>. We recommend you start your application early so you know what to expect with the system.

***Late proposals will not be considered.***

- Generative artificial intelligence (AI) tools are becoming increasingly prevalent. While AI is a helpful administrative tool, it is important to ensure that proposals reflect authentic responses and realistic service delivery plans.
- It is the policy of BHSB to adhere to the rules and regulations in the Health Insurance Portability and Accountability Act (HIPAA), which require appropriate safeguards to protect the confidentiality, integrity, and security of all protected health information. No proposals submitted in response to this RFP should include individually identifiable health information.

For more information, please refer 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>.

#### B. 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 (20 points)

- a. Provide an overview of your organization, including its history, mission, and overall purpose.
- b. Describe your organization's history and experience, including the length of time delivering services:
  - i. Serving the children and youth
  - ii. Families who are involved with BCDSS in some capacity, and are facing moderate to high-risk, complex mental health problems, population.
- c. Describe your organization's ability to access third-party reimbursement, particularly Medicaid, for behavioral health services.



- d. Describe your organization's experience managing programs similar to this project, meeting contractual deliverables and obligations (including any contracts with BHSB), and your capacity to manage the programmatic and financial requirements of this grant.

## **2. Principles and Values (15 points)**

- a. What are the core values that drive your organization's work, and how do you operationalize them? How would they drive this proposed project?
- b. Describe your organization's commitment to serving all people and being responsive to individual, family, and community differences. How do you operationalize this commitment?
- 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.

## **3. Service Delivery (20 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 plan to implement person and family-centered services and treatment planning to include support of behavioral health needs, medical needs, and other identified areas of needed support to ensure overall well-being.
- c. Describe how your organization will collaborate with BCDSS and partners to identify and engage individuals in need of services and ensure that all individuals referred will, with consent, be linked to and/or receive needed services.
- d. Describe other behavioral health services your organization provides and what structure/process you will use to avoid conflicts of interest and inappropriate self-referral.

## **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 your organization's practices to retain staff. Provide the turnover rate of licensed mental health professionals over the past two years.

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

- a. Describe your organization's history and expertise in serving the focus population of this RFP.
- b. Describe how your organization is uniquely qualified to address the needs of each person served through this project. How will you take into consideration individual, family, and community differences experienced by the focus population?

## **6. Program Evaluation and Quality Assurance (10 points)**

- a. Describe how your organization obtains and incorporates feedback from people served and other stakeholders. How do you use feedback to develop, implement, operationalize, and/or improve program services?
- b. How does your organization support ongoing quality improvement?

## **7. Implementation Timeline (10 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 on November 1, 2025.

## **8. Appendices**

- Copies of all relevant licenses/certifications, including any licenses issued by the Maryland Department of Health (BHA and OHCQ). BHSB is aware that BHA is experiencing delays with license applications. Please upload a copy of the letter from BHA acknowledging receipt of the application, along with a copy of the most recent license.
- 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
- Organizational chart
- Resume or curriculum vitae for individuals/consultants working on this project.
- Letters of Support - must be no older than 2 years.

**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, please upload a statement detailing why.**

- **Most recent IRS 990 – Return of Organization Exempt from Income Taxes, OR if an IRS 990 form is not required to be filed, the most recent Business Tax Return, OR the Schedule C only of the most recent Personal Tax Return. (Please redact any social security numbers on the Schedule C.)**
- **Certificate of Good Standing from the Maryland Department of Assessments and Taxation (screenshots from the MDAT website will not be accepted) - the certificate must be dated within one year of the RFP submission due date.**