

REQUEST FOR PROPOSALS (RFP): Substance Use Urgent Care RFP

Pre-Proposal Conference Held: December 9, 2025, | 2 p.m.

BHSB Facilitators:

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QUESTIONS AND ANSWERS

Posted: December 22, 2025

Question 1

Will rent and utilities be covered by the funder? If not, what are the estimated rent and utilities costs if you have these available?

Answer: The Substance Use Urgent Care Center (“Center”) operator contracts with BHSB who sub-leases from the Baltimore City Health Department for use of the space. The Center operator is responsible for utilities, liability insurance, facility maintenance, and one dollar (\$1.00) rent per year. Utilities can be charged to this contract. The current operator budgeted \$79,000 per year for utilities.

Question 2

Will Janitorial services be covered by the funder?

Answer: Janitorial services are an allowable expense.



Question 3

Are there additional parking costs (need to rent parking spaces?)

Answer: Street parking is available for free and is readily available. BHSB does not have information about the availability of off-street parking.

Question 4

Is there any kitchen equipment in the facility? Or warming stations?

Answer: There is no kitchen in the facility. There is a kitchenette. BHSB is in the process of obtaining a complete equipment inventory list. BHSB will work with the selected applicant to sufficiently equip the Center.

Question 5

Is there an existing security system with security cameras in the facility that the provider may utilize?

Answer: BHSB is in the process of obtaining a complete equipment inventory list. BHSB will work with the selected applicant to sufficiently equip the Center.

Question 6

Is the provider required to use a certain electronic health record (EHR) software?

Answer: There is no particular EHR software required. The selected applicant will be required to provide a file transfer of required fields from their electronic health system to BHSB for analysis of program metrics.



Question 7

What is the payor mix?

Answer: The project is currently entirely funded with the State Opioid Response (SOR) grant and federal block grant funds.

The selected applicant will be expected to collaborate with BHSB to identify opportunities to generate Medicaid fee-for-service revenue and will bill for all applicable services.

Question 8

What is the Medicaid rate for services?

Answer: The project is currently entirely funded with State Opioid Response (SOR) grant and federal block grant funds.

The selected applicant will be expected to collaborate with BHSB to identify opportunities to generate Medicaid fee-for-service revenue and will bill for all applicable services.

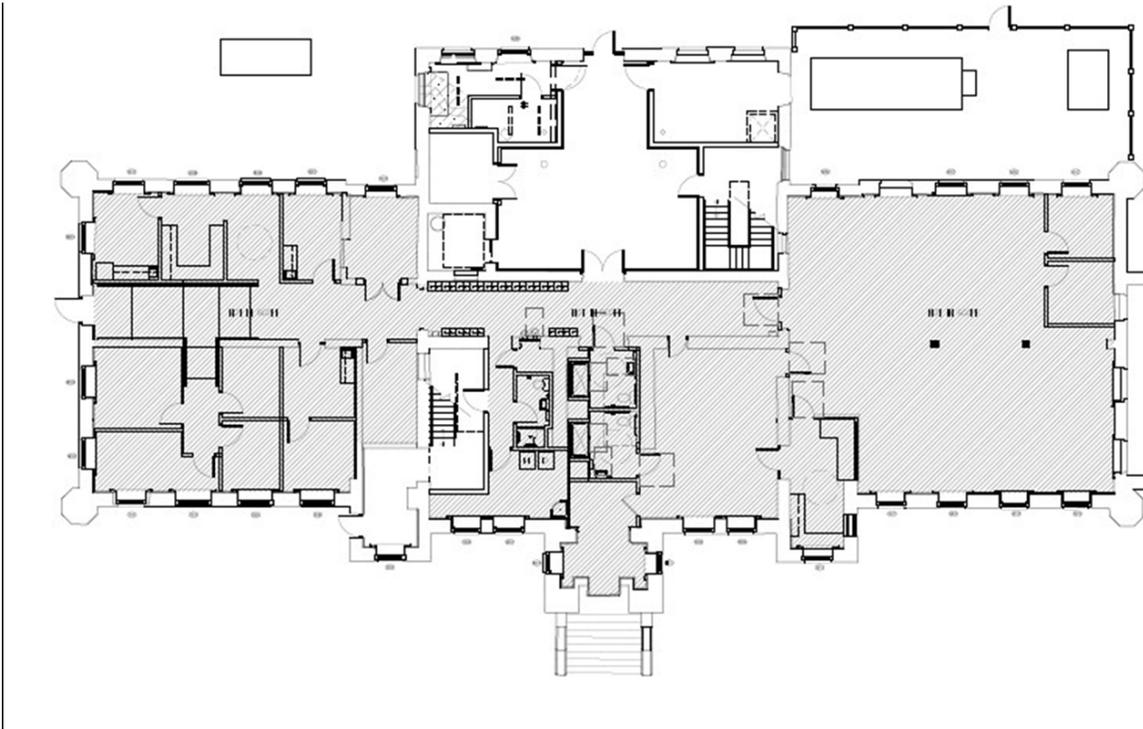
Question 9

Is there a blueprint of the facility that can be provided?

Answer: Yes, please see below.



Floor Plan (in gray)





Picture of treatment room



Question 10

What are the nutritional/food requirements for the patients? (3 meals a day?)

Answer: There are no specific food requirements for consumers. The expectation is that food will be provided consistent with an individual's length of stay in the program. (The median length of stay is currently 10 hours.)

Question 11

Will any start-up costs be covered by the funder?

Answer: Providers who would like to use FY27 funds for start-up should indicate the proposed use of funds in the budget, and BHSB will consider the request.



There may be funding available from April 1 through June 30, 2026, to support a smooth transition and maintain uninterrupted services at the Center. This funding would be intended to cover staff recruitment and planning activities. BHSB staff will inform the selected applicant if and when funding becomes available to support the transition.

Question 12

Does the actual expenditures contract permit the allocation of funds for start-up costs? If so, what percentage of the total contract value can be used ?

Answer: Providers who would like to use FY27 funds for program implementation should indicate the proposed use of funds in the budget, and BHSB will consider the request. There is not a designated percentage that can be used for start-up.

Question 13

I am assuming this is only for Baltimore City, correct?

Answer: Services are located in Baltimore City. There is no residency requirement for service delivery.

Question 14

Does BHSB have a specific plan in place for providers to be able to bill MD Medicaid for this service?

Answer: There is no specific plan in place at this time. The selected applicant will be expected to collaborate with BHSB to identify opportunities to generate Medicaid fee-for-service revenue and will bill for all applicable services.



Question 15

Do you know where this will be physically housed? And is it a 24-hour max stay?

Answer: The Center will be located at 2700 Rayner Avenue in Baltimore, MD. The targeted maximum length of stay is 23 hours, but there can be exceptions as needed.

Question 16

What services are currently reimbursable?

Answer: The current provider does not bill for services. The selected applicant will be expected to collaborate with BHSB to identify opportunities to generate Medicaid fee-for-service revenue and will bill for all applicable services.

Question 17

Why is there an MCO enrollment requirement?

Answer: The MCO requirement has been removed from the requirement for this RFP.

Question 18

What does utilization look like – time of day/days of week?

Answer: According to program data from CY25, the highest volume times of day are 12:00pm to 6:00pm, and the lowest volume is 12:00am to 6:00 am. Volume per day of the week is fairly consistent, with volume slightly lower on Saturdays and Sundays.

Question 19

What is total utilization?



Answer: According to program data from CY25, there was an average of 317 admissions per month. The selected applicant will be expected to work with BHSB to increase utilization of the center.

Question 20

What does a successful linkage to care look like? How many are linked to care?

Answer: The selected applicant is responsible for ensuring that consumers are offered a range of clinically appropriate, person-centered referral options upon discharge. Linkage to care should include a range of services for people who want treatment and for people who want to use drugs in a safer way. Referrals can be to any level of treatment or programs for people who use drugs. All referrals should prioritize individual needs, preferences, and clinical appropriateness.

The Center must operate independently from all other services within the selected applicant's continuum of care. Consumers must not be automatically directed to programs operated by the selected applicant.

In FY25, 88% were linked to care at discharge.

Question 21

On page 12, the RFP indicates that monies cannot be used for services that are reimbursable under Maryland's public behavioral health system or by private insurers. Does BHSB already know what those services are? If so, what are they?

Answer: BHSB is exploring the opportunity to access fee-for-service revenue. The selected applicant will be expected to collaborate with BHSB to identify opportunities to generate Medicaid fee-for-service revenue and will bill for all applicable services.



Question 22

Will funds support purchasing vehicles?

Answer: A request to purchase a vehicle would need to be approved by the funder. If allowed, any vehicles purchased would need to be returned to the program at the end of the sub-vendor's contract.

Question 23

There doesn't appear to be a line-item budget mentioned – is one required or preferred for this RFP?

Answer: A line item budget is listed in the Appendices as a required item.

Question 24

When will BHSB know if the selected applicant will be able to receive funding from April 1 – June 30, 2026, to support a smooth transition and uninterrupted services at the Center?

Answer: BHSB does not have a timeline for identification of funding. BHSB staff will inform the selected applicant if and when funding becomes available to support the transition.

Question 25

What are the barriers related to under-utilization of services, and will BHSB work closely with the selected provider to mitigate previous barriers?

Answer: Some identified barriers are lack of awareness about the Center and low volume of Emergency Medical Services (EMS) drop-offs. The selected applicant will be expected to work closely with BHSB to publicize the services of the Center. They will also be expected to partner with EMS to establish and maintain a collaborative process with EMS to improve and streamline drop-off procedures. In addition,



BHSB conducted focus groups with consumers, who identified that fostering a non-stigmatizing, welcoming and calming environment where consumers feel supported through positive interactions with Center staff is also important.

Question 26

Are there any concerns with the new operator assuming staff from previous operations?

Answer: BHSB is not aware of any concerns.

End of Questions and Answers